

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000008820

**Entity Name:** FOUNDATION OF ASSOCIATED INDUSTRIES OF FLORIDA, INC.**FILED**  
**Apr 04, 2024**  
**Secretary of State**  
**5733129784CC****Current Principal Place of Business:**516 N ADAMS STREET  
TALLAHASSEE, FL 32301**Current Mailing Address:**PO BOX 784  
TALLAHASSEE, FL 32302**FEI Number: 80-0277629****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TRICKEY, STEPHEN B  
516 N ADAMS STREET  
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE: STEPHEN B. TRICKEY****04/04/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                           |
|-----------------|---------------------------|
| Title           | CHAIRMAN                  |
| Name            | GONZALEZ, JOSE L          |
| Address         | 1375 E BUENA VISTA DR     |
| City-State-Zip: | LAKE BUENA VISTA FL 32830 |

|                 |                      |
|-----------------|----------------------|
| Title           | DIRECTOR             |
| Name            | BEVIS, BREWSTER B    |
| Address         | 516 N ADAMS ST       |
| City-State-Zip: | TALLAHASSEE FL 32301 |

|                 |                      |
|-----------------|----------------------|
| Title           | DIRECTOR             |
| Name            | SHIVER, STEPHEN W    |
| Address         | 204 S. MONROE ST     |
| City-State-Zip: | TALLAHASSEE FL 32301 |

|                 |                             |
|-----------------|-----------------------------|
| Title           | DIRECTOR                    |
| Name            | KINNEY, ALLISON             |
| Address         | 414 E BLOXHAM ST<br>STE 500 |
| City-State-Zip: | TALLAHASSEE FL 32301        |

|                 |                      |
|-----------------|----------------------|
| Title           | DIRECTOR             |
| Name            | REES, JONATHAN       |
| Address         | 311 E PARK AVE       |
| City-State-Zip: | TALLAHASSEE FL 32301 |

|                 |                              |
|-----------------|------------------------------|
| Title           | DIRECTOR                     |
| Name            | COOPER, CAMERON              |
| Address         | 106 E COLLEGE AVE<br>STE 800 |
| City-State-Zip: | TALLAHASSEE FL 32301         |

|                 |                            |
|-----------------|----------------------------|
| Title           | DIRECTOR                   |
| Name            | CULLIGAN, THOMAS           |
| Address         | 3300 PUBLIX CORPORATE PKWY |
| City-State-Zip: | LAKELAND FL 33811          |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: BREWSTER B BEVIS****DIRECTOR****04/04/2024**

Electronic Signature of Signing Officer/Director Detail

Date