

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011061

Entity Name: THE FLORIDA RECYCLING PARTNERSHIP, INC.**Current Principal Place of Business:**730 EAST PARK AVENUE
TALLAHASSEE, FL 32301**Current Mailing Address:**730 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US**FEI Number:** 27-1296512**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORY, KEYNA D
730 EAST PARK AVENUE
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	CORY, KEYNA
Address	730 EAST PARK AVE
City-State-Zip:	TALLAHASSEE FL 32301

Title	C
Name	LEZMAN, STEVEN
Address	1001 13TH AVENUE EAST
City-State-Zip:	BRADENTON FL 34208

Title	CHAIRMAN
Name	MCCORMICK, DAWN
Address	2700 WILES ROAD
City-State-Zip:	POMPANO BEACH FL 33073

Title	D
Name	TONER, JAMES
Address	1700 DIAGONAL ROAD SUITE 650
City-State-Zip:	ALEXANDRIA VA 22314

Title	D
Name	DEWITT, ELIZABETH
Address	135 JENKINS ST. SUITE 105B #199
City-State-Zip:	ST AUGUSTINE FL 32086

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: KEYNA D. CORY**EXECUTIVE DIRECTOR****04/08/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date