

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

DOCUMENT# N10000000564

**Entity Name:** OPERATION HEART F.E.L.T. FOUNDATION, INC.

**Current Principal Place of Business:**

P. O BOX 1682  
BROOKSVILLE, FL 34605

**Current Mailing Address:**

P.O.BOX 1682  
BROOKSVILLE, FL 34605

**FEI Number: 27-1699626**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DANNEMILLER, DIANE  
520 COLONIAL DRIVE  
BROOKSVILLE, FL 34601 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           TREASURER  
Name           DANNEMILLER, DIANE M  
Address        520 COLONIAL DRIVE  
City-State-Zip: BROOKSVILLE FL 34601

Title           SECRETARY  
Name           HEALIS, DANIELLE  
Address        9947 DOMINGO DRIVE  
City-State-Zip: BROOKSVILLE FL 34601

Title           CO-CHAIRMAN  
Name           STEPBACH, PATTIE  
Address        9948 DOMINGO DRIVE  
City-State-Zip: BROOKSVILLE FL 34601

Title           CO-CHAIRMAN  
Name           LAIELLI, KEVIN  
Address        23327 EPPLEY DRIVE  
City-State-Zip: BROOKSVILLE FL 34601

*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: DIANE DANNEMILLER**

**TREASURER**

**02/03/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date