

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000003805

Entity Name: START OFF SMART, INC.**Current Principal Place of Business:**45 N.W. 1 AVENUE
HOMESTEAD, FL 33030-5910**Current Mailing Address:**45 NW 1 AVENUE
HOMESTEAD, FL 33030-5910 US**FEI Number:** 61-1657873**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NANNI, SANDRA
27330 RUE DE PAIX
BONITA SPRINGS, FL 34135 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	DIRECTOR
Name	NANNI, SANDRA
Address	27330 RUE DE PAIX
City-State-Zip:	BONITA SPRINGS FL 34135

Title	BOARD MEMBER
Name	WASHINGTON, ANGIE
Address	45 NW 1 AVENUE
City-State-Zip:	HOMESTEAD FL 33030-5910

Title	CHAIRMAN
Name	MORRERO, HAROLD
Address	30 EDGEWATER DRIVE 207
City-State-Zip:	CORAL GABLES FL 33133

Title	BOARD MEMBER
Name	REYES, ALISHA
Address	45 NW 1 AVENUE
City-State-Zip:	HOMESTEAD FL 33030

Title	SD
Name	LYEW, DEBBIE
Address	25045 SW 123 CT
City-State-Zip:	PRINCETON FL 33032

Title	BOARD MEMBER
Name	GARCIA, NANCY
Address	45 NW 1 AVENUE
City-State-Zip:	HOMESTEAD FL 33030-5910

Title	BOARD MEMBER
Name	CLARK, TONI
Address	505 SW 8 STREET
City-State-Zip:	HOMESTEAD FL 33030

Title	BOARD MEMBER
Name	MCKINNON, CHARLES
Address	9760 SW 210 STREET
City-State-Zip:	CUTLER BAY FL 33189

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: SANDRA NANNI**DIRECTOR****01/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date