

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000001129

**FILED**  
**Jan 06, 2015**  
**Secretary of State**  
**CC8009704509**

**Entity Name:** INTERNACHI 4 POINT O CHARITY CORP.

**Current Principal Place of Business:**

2216 HILLRD.  
PALM HARBOR, FL 34683

**Current Mailing Address:**

2216 HILLRD.  
PALM HARBOR, FL 34683 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CURTIS, LEE  
2216 HILL RD.  
PALM HARBOR, FL 34683 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 P  
Name CURTIS, LEE  
Address 2216 HILL RD.  
City-State-Zip: PALM HARBOR FL 34683

Title VP  
Name BABCOCK, TOM  
Address 6409 ELDORADO DR  
City-State-Zip: TAMPA FL 33615

Title TR  
Name WIEGNER, STEVEN  
Address 1334 MONTE LAKE DR.  
City-State-Zip: VALRICO FL 33596

Title S  
Name VAN EOPOEL, THOMAS J  
Address 4306 W. NORTH A ST  
City-State-Zip: TAMPA FL 33609

Title BM  
Name GROMICKO, NICK  
Address 1760 30TH STREET  
City-State-Zip: BOULDER CO 80301

Title BM  
Name AVRIN, REBECCA  
Address 1716 CLEVELAND ST.  
City-State-Zip: CLEARWATER FL 33755

*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: STEVEN E WIEGNER**

**TREASURER**

**01/06/2015**

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

\_\_\_\_\_  
Date