## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000005113

Entity Name: MARC MOORE MEMORIAL HIGHLINE HERO FOUNDATION, INC.

FILED Apr 23, 2015 Secretary of State CC4907132265

## **Current Principal Place of Business:**

5235 PAUL BROWN ROAD LAKELAND, FL 33810

## **Current Mailing Address:**

5235 PAUL BROWN ROAD LAKELAND, FL 33810

FEI Number: 80-0832998 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MOORE, TRACY D 5235 PAUL BROWN ROAD LAKELAND, FL 33810 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 EXECUTIVE DIRECTOR Title

Name MOORE, TRACY D Name NEWBERRY, CINDY

Address 5235 PAUL BROWN ROAD Address PO BOX 162

City-State-Zip: LAKELAND FL 33810 City-State-Zip: KATHLEEN FL 33849

Title D Title DIRECTOR

Name NEWBERRY, JAMES Name DAVIS, JUDY

Address PO BOX 162 Address 5235 PAUL BROWN ROAD

City-State-Zip: KATHLEEN FL 33849 City-State-Zip: LAKELAND FL 33810

Title BOARD MEMBER

Name ECKELBERGER, ROBIN
Address 5235 PAUL BROWN ROAD
City-State-Zip: LAKELAND FL 33810

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: TRACY D. MOORE

Electronic Signature of Signing Officer/Director Detail

EXECUTIVE DIRECTOR

04/23/2015