

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000009643

**Entity Name:** ANNIERUTH FOUNDATION, INC.

**Current Principal Place of Business:**

2579 WOOLERY DRIVE  
JACKSONVILLE, FL 32211

**Current Mailing Address:**

2579 WOOLERY DRIVE  
JACKSONVILLE, FL 32211 US

**FEI Number:** 46-1171456

**Certificate of Status Desired:** No

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

WILCOX, DEANDROUS A  
2579 WOOLERY DRIVE  
JACKSONVILLE, FL 32211 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            S, SECRETARY  
Name            JOHNSON, STANLEY L  
Address        1592 COOL RAIN CT  
City-State-Zip: JACKSONVILLE FL 32225

Title            PRESIDENT  
Name            WASHINGTON, SELINE  
Address        16010 WILLOW BLUFF CT  
City-State-Zip: JACKSONVILLE FL 32218

Title            TREA  
Name            SANDERS, JANICE  
Address        12367 SHELL BEACH TRAIL  
City-State-Zip: JACKSONVILLE FL 32246

Title            DIRECTOR  
Name            WILCOX, DEANDROUS ANITA  
Address        2579 WOOLERY DRIVE  
City-State-Zip: JACKSONVILLE FL 32211

*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:** DEANDROUS WILCOX

**EXEC DIRECTOR**

**04/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date