

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000000591

Entity Name: WHO WE PLAY FOR, INC.**Current Principal Place of Business:**2412 IRWIN STREET
MELBOURNE, FL 32901**Current Mailing Address:**106 DELEON RD.
COCOA BEACH, FL 32931 US**FEI Number:** 46-2485938**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOLLIMON, WILLIAM H.
118 N. GADSDEN ST.
TALLAHASSEE, FL 32301 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:** WILLIAM H. HOLLIMON

02/13/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR
Name ERNST, EVAN
Address 106 DELEON RD.
City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR
Name MITCHELL, PAUL
Address 123 S. ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title CHAIRMAN
Name MACCARONE, RALPH
Address 292 GINGER CIRCLE
City-State-Zip: PAGOSA SPRINGS CO 81147

Title DIRECTOR
Name COLLOREDO, SCOTT
Address 15 YAWL DRIVE
City-State-Zip: COCOA BEACH FL 32931

Title SECRETARY
Name SCHULTZ, ZANE
Address 1559 STANFORD AVE
City-State-Zip: MERRITT ISLAND FL 32952

Title DIRECTOR
Name VERMETTE, CAM
Address 3139 SPRUCE ST
City-State-Zip: DENVER CO 80238

Title DIRECTOR
Name ELEFF, TSVI
Address 22 HARRISON STREET
City-State-Zip: EDISON NJ 08817

Title DIRECTOR
Name MACTAGGART, CHRISTINE
Address 25 LINDSAY DRIVE
City-State-Zip: GREENWICH CT 06830

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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: EVAN ERNST

EXECUTIVE DIRECTOR

02/13/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DADLANI, GUL DR.
Address 11692 SAVONA WAY
City-State-Zip: ORLANDO FL 32837

Title DIRECTOR
Name OLIVER, ELIZABETH
Address 431 SWANN GROVE LN
City-State-Zip: MERRITT ISLAND FL 32952

Title TREASURER
Name CANADA, TREY
Address 11 VALENCIA RD
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name WALSH, ANDRE
Address 18757 NATHAN'S PLACE
City-State-Zip: MONTGOMERY VILLAGE MD 20886

Title DIRECTOR
Name BLACK, ROBERT J.
Address 675 N HARLAN ST
City-State-Zip: LAKEWOOD CO 80214