# 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: KAREN FISHER

Electronic Signature of Signing Officer/Director Detail

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04/23/2024

## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N13000004595

#### Entity Name: THE DIRECTED BENEFITS FOUNDATION, INC.

#### Current Principal Place of Business:

401 EAST JACKSON STREET SUITE 3300 TAMPA, FL 33602

#### **Current Mailing Address:**

401 EAST JACKSON STREET SUITE 3300 TAMPA, FL 33602 US

#### FEI Number: 46-2831101

### Name and Address of Current Registered Agent:

FISHER, KAREN 401 EAST JACKSON STREET SUITE 3300 TAMPA, FL 33602 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	: KAREN FISHER			04/23/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	SECRETARY, DIRECTOR	Title	DIRECTOR	
Name	FISHER, KAREN	Name	SCHROEDER, DAVID E	
Address	401 EAST JACKSON STREET SUITE 3300	Address	401 EAST JACKSON STREET SUITE 3300	
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602	
Title	PRESIDENT, DIRECTOR			
Name	SAUER, ELIZABETH			
Address	401 EAST JACKSON STREET SUITE 3300			
City-State-Zip:	TAMPA FL 33602			

Certificate of Status Desired: No

FILED Apr 23, 2024 Secretary of State 9337022734CC