

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000006290

**Entity Name:** PHILANTHROPY TANK INC.

**Current Principal Place of Business:**

120 SOUTH OLIVE AVE  
#300  
WEST PALM BEACH , FL 33401

**Current Mailing Address:**

120 SOUTH OLIVE AVE  
#300  
WEST PALM BEACH , FL 33401 US

**FEI Number:** 46-3206074

**Certificate of Status Desired:** No

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

KOHNER, MICHAEL  
120 SOUTH OLIVE AVE  
#300  
WEST PALM BEACH , FL 33401 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:** MICHAEL KOHNER

05/21/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DEOUL, EVAN  
Address        777 S FLAGLER DR,SUITE 1601 WEST  
City-State-Zip: WEST PALM BEACH FL 33401

Title            TREASURER  
Name            KOHNER, MICHAEL L  
Address        525 OKEECHOBEE BLVD  
                 SUITE 1140  
City-State-Zip: WEST PALM BEACH FL 33401

Title            DIRECTOR  
Name            FLAH, RICHARD  
Address        7111 FAIRWAY DRIVE #303  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title            S  
Name            MEYERS, WILLIAM  
Address        1601 BELVEDERE RD 407S  
City-State-Zip: W PALM BEACH FL 33406

Title            DIRECTOR  
Name            HANLEY, DANIEL  
Address        777 SOUTH FLAGLER DRIVE  
                 SUITE 500 EAST  
City-State-Zip: WEST PALM BEACH FL 33401

Title            DIRECTOR  
Name            JONES, MARSHALL  
Address        470 COLUMBIA DRIVE  
                 # 100E  
City-State-Zip: WEST PALM BEACH FL 33401

*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:** MICHAEL KOHNER

**TREASURER**

05/21/2020

Electronic Signature of Signing Officer/Director Detail

Date