

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010721

Entity Name: HARVEY AND CAROL MASSEY FOUNDATION, INC.**Current Principal Place of Business:**315 GROVELAND STREET
ORLANDO, FL 32804**Current Mailing Address:**315 GROVELAND STREET
ORLANDO, FL 32804**FEI Number:** 46-4222620**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LOWMAN, JR., WILLIAM R ESQ.
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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	D
Name	MASSEY, HARVEY L
Address	315 GROVELAND STREET
City-State-Zip:	ORLANDO FL 32804

Title	D
Name	MASSEY, ANTHONY L
Address	315 GROVELAND STREET
City-State-Zip:	ORLANDO FL 32804

Title	PRESIDENT /DIRECTOR
Name	MASSEY-FARRELL, ANDREA L.
Address	315 GROVELAND STREET
City-State-Zip:	ORLANDO FL 32804

Title	SECRETARY, DIRECTOR
Name	LOWMAN, JR., WILLIAM R
Address	315 GROVELAND STREET
City-State-Zip:	ORLANDO FL 32804

Title	D
Name	RIGNANESE, ANGELA M
Address	315 GROVELAND STREET
City-State-Zip:	ORLANDO FL 32804

Title	TREASURER, DIRECTOR
Name	ELIAS, GWYN A
Address	315 GROVELAND STREET
City-State-Zip:	ORLANDO FL 32804

Title	DIRECTOR
Name	MASSEY, CAROL A.
Address	315 GROVELAND STREET
City-State-Zip:	ORLANDO FL 32804

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: HARVEY L. MASSEY

DIRECTOR

02/05/2015

Electronic Signature of Signing Officer/Director Detail_____
Date