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: BETH GOSNELL

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PRESIDENT	Title	BOARD MEMBER	
Name	MOSS, TONY	Name	TIDMORE, JIM	
Address	27216 SEA BREEZE WAY	Address	1818 SOUTH POINCIANA BLVD.	
City-State-Zip:	WESLEY CHAPEL FL 33544	City-State-Zip:	KISSIMMEE FL 34758	
Title	EXECUTIVE DIRECTOR			
Name	GOSNELL, BETH			
Address	1844 N. LAKE BRENTWOOD ROAD			
City-State-Zip:	AVON PARK FL 33825			

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.

Name and Address of Current Registered Agent:

GOSNELL, BETH 1844 N. LAKE BRENTWOOD ROAD AVON PARK, FL 32302 US

DOCUMENT# N1400000050

Entity Name: FAWD EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

1844 N. LAKE BRENTWOOD ROAD AVON PARK, FL 33825

Current Mailing Address:

1844 N. LAKE BRENTWOOD ROAD AVON PARAK. FL 33825 US

FEI Number: 47-1612615

Certificate of Status Desired: No

Date

01/18/2023

EXECUTIVE DIRECTOR

Date