

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000000069

**Entity Name:** HUNGER BUS, INC.

**Current Principal Place of Business:**

3503 ISLAND VIEW DRIVE  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

3503 ISLAND VIEW DRIVE  
PUNTA GORDA, FL 33950

**FEI Number:** 46-4432730

**Certificate of Status Desired:** No

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

SMITH, CHARLES B  
3503 ISLAND VIEW DRIVE  
PUNTA GORDA, FL 33950 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            PRES  
Name            SMITH, CHARLES B  
Address        3503 ISLAND VIEW DRIVE  
City-State-Zip: PUNTA GORDA FL 33950

Title            VP  
Name            HAYMANS, MICHAEL P.  
Address        215 WEST OLYMPIA AVENUE  
City-State-Zip: PUNTA GORDA FL 33950

Title            DIRECTOR, TREASURER  
Name            BALSAMO, MICHAEL  
Address        1675 SOUTH COUNTY TRAIL  
City-State-Zip: EAST GREENWICH RI 02818

Title            DIRECTOR  
Name            LYDON, DAVID  
Address        275 WALMSELY LANE  
City-State-Zip: SAUNDERSTOWN RI 02874-3617

Title            DIRECTOR, SECRETARY  
Name            GAMBLE, KATHLEEN  
Address        3503 ISLAND VIEW DRIVE  
City-State-Zip: PUNTA GORDA FL 33950

*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 P HAYMANS

**VICE PRESIDENT**

**04/27/2022**

Electronic Signature of Signing Officer/Director Detail

Date