

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000005846

Entity Name: KREWE OF LAFITTE FOUNDATION, INC.**Current Principal Place of Business:**630 SOUTH D STREET
PENSACOLA, FL 32502**Current Mailing Address:**630 SOUTH D STREET
PENSACOLA, FL 32502 US**FEI Number:** 47-1171560**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BEDNAR, MARK A.
11 EAST ZARAGOZA
PENSACOLA, FL 32502 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:** JOHNNIE R. BLACKMON

05/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name VILLAR, JOSEPH
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

Title TREA
Name BLACKMON, JOHNNIE R
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

Title SEC
Name JERNIGAN, KENNETH E
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

Title VICE PRESIDENT
Name RICHARDS, DON
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

Title D
Name CULBERTSON, WARREN
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

Title D
Name SEARS, WILLIAM
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

Title D
Name BEDNAR, MARK
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

Title D
Name COURTNEY, LUKE
Address 630 SOUTH D STREET
City-State-Zip: PENSACOLA FL 32502

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: JOHNNIE BLACKMON**TREASURER**

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date