#### 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. 06/27/2020

PASTOR

#### SIGNATURE: LISA JACKSON

Electronic Signature of Signing Officer/Director Detail

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.

# 0

113 DECKERT ST.

City-State-Zip: INTERLACHEN FL 32148

SIGNATURE:

Address

	Electronic Signature of Registered Agent		
Officer/Dir	ector Detail :		
Title	Р	Title	т
Name	JACKSON, LEROY	Name	JACKSON, LISA D
Address	113 DECKERT ST.	Address	113 DECKERT ST.
City-State-Zip	: INTERLACHEN FL 32148	City-State-Zip:	INTERLACHEN FL 32148
Title	S		
Name	WASHINGTON, DAPHNE I		

## Name and Address of Current Registered Agent:

JACKSON, LISA D 23670 NE154TH PLACE ROAD FORT MCCOY, FL 32134 US

**Current Principal Place of Business:** 

23670 NE154TH PLACE ROAD FORT MCCOY, FL 32134

### **Current Mailing Address:**

23670 NE154TH PLACE ROAD FORT MCCOY, FL 32134 US

## FEI Number: 47-2088573

# Entity Name: THE WILLIE MAE FOUNDATION INC.

#### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N14000009120

FILED Jun 27, 2020 Secretary of State 1297172910CC

Date

Certificate of Status Desired: Yes

Date