

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000009123

**Entity Name:** COMPETE 2 GIVE, INC.**Current Principal Place of Business:**3759 COVENTRY LANE  
BOCA RATON, FL 33496**Current Mailing Address:**3759 COVENTRY LANE  
BOCA RATON, FL 33496 US**FEI Number:** 47-1789531**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SACKS, BARBARA S MRS.  
3759 COVENTRY LANE  
BOCA RATON, FL 33496 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	VP
Name	GOLDFARB, JONATHAN
Address	1850 HOMEWOOD BLVD APT 303
City-State-Zip:	DELRAY BEACH FL 33496

Title	SVP, OFFICER
Name	SACKS, MARK
Address	3759 COVENTRY LANE
City-State-Zip:	BOCA RATON FL 33496

Title	PRESIDENT
Name	SACKS, BARBARA
Address	3759 COVENTRY LANE
City-State-Zip:	BOCA RATON FL 33496

Title	DIR
Name	MONTILLA, HUGO
Address	2460 TIGERTRAIL AVE
City-State-Zip:	COCONUT GROVE FL 33133

Title	DIR
Name	SAAVEDRA, JOE
Address	3759 COVENTRY LANE
City-State-Zip:	BOCA RATON FL 33496

*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:** BARBARA SACKS**PRESIDENT****02/18/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date