

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000010642

Entity Name: OPERATION KINDNESS FLORIDA, INC.**Current Principal Place of Business:**601 YARDARM LANE
LONGBOAT KEY, FL 34228**Current Mailing Address:**601 YARDARM LANE
LONGBOAT KEY, FL 34228 US**FEI Number: 47-2377526****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FORCH, JOANNE
601 YARDARM LANE
LONGBOAT KEY, FL 34228 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: JOANNE FORCH****02/15/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name FORCH, JOANNE
Address 600 YARDARM
City-State-Zip: LONGBOAT KEY FL 34228

Title VP
Name FAVILENE, LORRAINE
Address 20173 HARBOUR LINKS DR
City-State-Zip: LONGBOAT KEY FL 34228

Title D
Name CRINCOLI, PAT
Address 3388 BAYOU LANE
City-State-Zip: LONGBOAT KEY FL 34228

Title D
Name GORMAN, KERRY
Address 2063 HARBOUR LINKS DR
City-State-Zip: LONGBOAT KEY FL 34228

Title TREASURER
Name ROSICA, GABE S
Address 2120 HARBOURSIDE DRIVE, UNIT 625
City-State-Zip: LONGBOAT KEY FL 34228

Title SD
Name BLUME, MYRNA
Address 3302 SABAL COVE LANE
City-State-Zip: LONGBOAT KEY FL 34228

Title D
Name GORMAN, KEN
Address 2063 HARBOUR LINKS DR
City-State-Zip: LONGBOAT KEY FL 34228

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: JOANNE FORCH**PRESIDENT****02/15/2017**

Electronic Signature of Signing Officer/Director Detail

Date