## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000001965

Entity Name: 10 CAN INC

**Current Principal Place of Business:** 

1225 SW 226TH ST NEWBERRY, FL 32669

**Current Mailing Address:** 

PO BOX 1122

NEWBERRY, FL 32669 US

FEI Number: 47-2135088 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BURKE, MATTHEW R DR. 1225 SW 226TH ST NEWBERRY, FL 32669 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: DR. MATTHEW R. BURKE 05/18/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT, CEO, FOUNDER Title CO-FOUNDER

Name BURKE, MATTHEW R DR. Name BURKE, JASMINE JADE

Address 1225 SW 226TH ST Address PO BOX 1122

City-State-Zip: NEWBERRY FL 32669 City-State-Zip: NEWBERRY FL 32669

Title WILDERNESS DIRECTOR, VP Title AQUATICS DIVISION DIRECTOR, CFO

Name CLAYTOR, STEVE Name CARLISLE, STEPHEN

Address PO BOX 1122 Address PO BOX 1122

City-State-Zip: NEWBERRY FL 32669 City-State-Zip: NEWBERRY FL 32669

Title ADVISOR Title ADVISOR

Name WHEATON, JOEY Name CORONA, EDDIE
Address PO BOX 1122 Address PO BOX 1122

City-State-Zip: NEWBERRY FL 32669 City-State-Zip: NEWBERRY FL 32669

Title ADVISOR Title MARKETING DIRECTOR

Name JAECKLE, TINA DR. Name BATISTA, FREDDIE CHINO

Address PO BOX 1122 Address PO BOX 1122

City-State-Zip: NEWBERRY FL 32669 City-State-Zip: NEWBERRY FL 32669

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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: MATTHEW R. BURKE EXECUTIVE DIRECTOR 05/18/2021

Electronic Signature of Signing Officer/Director Detail

Date

FILED May 18, 2021

Secretary of State

6131804495CC

## Officer/Director Detail Continued:

Title HUNTING DIVISION DIRECTOR Title AG DIVISION DIRECTOR
Name PARKS, JON Name BURKE, MATTHEW DR.

Address PO BOX 1122 Address PO BOX 1122

City-State-Zip: NEWBERRY FL 32669 City-State-Zip: NEWBERRY FL 32669