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

DOCUMENT# N15000005089

Entity Name: WEHAVEAFACE.ORG INC.

**Current Principal Place of Business:** 

7035 BRANCH COURT SAINT CLOUD. FL 34771

**Current Mailing Address:** 

7035 BRANCH COURT SAINT CLOUD. FL 34771 US

FEI Number: 47-4075248 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 5575 S. SEMORAN BLVD. SUITE 36

ORLANDO,, FL 32822 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

FILED Jan 31, 2021

**Secretary of State** 

8470174595CC

Officer/Director Detail:

Title FOUNDER Title TREASURER

NameVALVANO, JAMESNameGERIG, ANTOINETTEAddress7035 BRANCH COURTAddress7035 BRANCH COURTCity-State-Zip:SAINT CLOUD FL 34771City-State-Zip:SAINT CLOUD FL 34771

Title SECRETARY Title DIRECTOR OF

MARKETING/COMMUNITY RELATIONS

Name CATALDI, ROSEMARY Name VALVANO, CRTSTAL A

Address 7035 BRANCH COURT Address 7035 BRANCH COURT

City-State-Zip: SAINT CLOUD FL 34771

City-State-Zip: SAINT CLOUD FL 34771

Title PRESIDENT Title DIRECTOR OF EDUCATION
Name TORRINGTON, IAN V

Name TORRINGTON, IAN V Name NEBLETT, CANDICE M.

Address 7035 BRANCH COURT Address 7035 BRANCH COURT

City-State-Zip: SAINT CLOUD FL 34771 City-State-Zip: SAINT CLOUD FL 34771

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Title VP Title DIRECTOR OF EVENT OPERATIONS

NameMEDINA, DANIELNamePULLIAM, JAMESAddress7035 BRANCH COURTAddress7035 BRANCH COURTCity-State-Zip:SAINT CLOUD FL 34771City-State-Zip:SAINT CLOUD FL 34771

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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: JAMES VALVANO FOUNDER 01/31/2021

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR OF COMMUNITY EVENTS

Name VISCIANO, MADELINE
Address 7035 BRANCH COURT
City-State-Zip: SAINT CLOUD FL 34771

Title DIRECTOR OF REGIONAL ADVOCACY AND

COMMUNITY DEVELOPMENT

Name ZACHARY, CRYSTAL
Address 7035 BRANCH COURT
City-State-Zip: SAINT CLOUD FL 34771

Title DIRECTOR OF HOSPICE AND PALLIATIVE CARE

**RESOURCES** 

Name JOHNSTON, DEBORAH
Address 7035 BRANCH COURT
City-State-Zip: SAINT CLOUD FL 34771

Title DIRECTOR OF PATIENT ADVOCACY

**ASSISTANCE** 

Name SPEARS, KIMBERLY
Address 7035 BRANCH COURT
City-State-Zip: SAINT CLOUD FL 34771

Title DIRECTOR OF COMMUNICATIONS

Name ALMEIDA, JENNIFER LYNN

Address 7035 BRANCH COURT
City-State-Zip: SAINT CLOUD FL 34771