

**2016 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

**FEI Number: 47-4075248**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD., SUITE A  
TAMPA, FL 33612 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 PD  
Name VALVANO, JAMES  
Address 7035 BRANCH COURT  
City-State-Zip: SAINT CLOUD FL 34771

Title T  
Name GERIG, ANTOINETTE  
Address 7035 BRANCH COURT  
City-State-Zip: SAINT CLOUD FL 34771

Title D  
Name NEBLETT, CHRISTINA  
Address 7035 BRANCH COURT  
City-State-Zip: SAINT CLOUD FL 34771

Title V  
Name VALVANO, AMELIA C  
Address 7035 BRANCH COURT  
City-State-Zip: SAINT CLOUD FL 34771

Title D  
Name VALVANO, CRTSTAL A  
Address 7035 BRANCH COURT  
City-State-Zip: SAINT CLOUD FL 34771

*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**

**PRESIDENT/FOUNDER**

**02/11/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date