

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000005108

**Entity Name:** FOLDS OF HONOR - NORTH FLORIDA INC.

**Current Principal Place of Business:**

501 S.SWEETWATER COVE BLVD.  
LONGWOOD, FL 32779

**Current Mailing Address:**

501 S.SWEETWATER COVE BLVD.  
LONGWOOD, FL 32779 US

**FEI Number:** 47-3924706

**Certificate of Status Desired:** No

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

MORRIS, SCOTT R  
501 S.SWEETWATER COVE BLVD.  
LONGWOOD, FL 32779 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            PRESIDENT  
Name            MORRIS, SCOTT R  
Address        501 S.SWEETWATER COVE BLVD.  
City-State-Zip: LONGWOOD FL 32779

Title            D  
Name            BABINEAU, JEFF  
Address        3989 CARNABY DRIVE  
City-State-Zip: OVIEDO FL 32765

Title            D  
Name            HOGGARD, REX  
Address        810 RIVERBEND BLVD.  
City-State-Zip: LONGWOOD FL 32779

Title            D  
Name            SMITH, RICH  
Address        1350 BOBCAT TRAIL BLVD  
City-State-Zip: NORTH PORT FL 33982

*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:** SCOTT R. MORRIS

**PRESIDENT**

**01/21/2020**

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

\_\_\_\_\_  
Date