

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000003784

Entity Name: THE GREATER SUM, INC.

Current Principal Place of Business:

1467 CHALLEN AVENUE
JACKSONVILLE, FL 32205

Current Mailing Address:

1467 CHALLEN AVENUE
JACKSONVILLE, FL 32205 US

FEI Number: 81-2326204

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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 DIRECTOR
Name SILVERSTEIN, TODD
Address 321 FULTON STREET
City-State-Zip: PALO ALTO CA 94301

Title DIRECTOR
Name THOMAS, ELLEN
Address 278 N. QUAKER LANE
City-State-Zip: WEST HARTFORD CT 06119

Title DIRECTOR
Name BROOKS, WADE T
Address 230 RICHMOND AVE SE
City-State-Zip: SALEM OR 97301

Title EXECUTIVE DIRECTOR
Name TAYLOR, ANNA
Address 1467 CHALLEN AVENUE
City-State-Zip: JACKSONVILLE FL 32205

Title DIRECTOR, CHAIRMAN
Name HUNSAKER, JUSTIN CHAD
Address 2933 LEE ROAD
City-State-Zip: SHAKER HEIGHTS OH 44120

Title DIRECTOR
Name MANDEL, RICHARD
Address 218 OLD SUDBURY ROAD
City-State-Zip: SUDBURY MA 01776

Title BOARD MEMBER
Name LAWRENCE, SMITH WALTER
Address 11618 SHELBY JAY DRIVE
City-State-Zip: RIVERVIEW FL 33579

Title BOARD MEMBER
Name PAUL, MORRIS F
Address 12905 SW SCOUT DRIVE
City-State-Zip: BEAVERTON OR 97008

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: ANNA TAYLOR

EXECUTIVE DIRECTOR

04/18/2022

Electronic Signature of Signing Officer/Director Detail

Date