

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000005116

Entity Name: FOREVER FROSTY FOUNDATION, INC.**Current Principal Place of Business:**19 ST. THOMAS DR
PALM BEACH GARDENS, FL 33418**Current Mailing Address:**19 ST. THOMAS DR
PALM BEACH GARDENS, FL 33418 US**FEI Number: 81-1478277****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HENDEL, ROBERT K
19 ST. THOMAS DR
PALM BEACH GARDENS, FL 33418 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	HENDEL, DAMIANN
Address	19 ST. THOMAS DR
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	CD
Name	HENDEL, ROBERT
Address	19 ST. THOMAS DR
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	D
Name	TIANO, SAL
Address	3801 PGA BLVD STE 800
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	STD
Name	SEGER, RUSS
Address	7733 BOLD LAD LN
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	D
Name	FARKAS, BLAYRE
Address	139 N COUNTY RD 18A
City-State-Zip:	PALM BEACH FL 33480

Title	D
Name	COURIS, JOHN
Address	1210 S OLD DIXIE HWY
City-State-Zip:	JUPITER FL 33458

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: ROBERT K. HENDEL**CHARIMAN****01/15/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date