

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000005797

**FILED**  
**Mar 02, 2017**  
**Secretary of State**  
**CC0099884265**

**Entity Name:** POWER2CHANGE FOUNDATION, INC.

**Current Principal Place of Business:**

3301 BONITA BEACH ROAD  
SUITE 300  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

3301 BONITA BEACH ROAD  
SUITE 300  
BONITA SPRINGS, FL 34134 US

**FEI Number:** 81-2927922

**Certificate of Status Desired:** No

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

GIACHETTI, LYNN  
16689 WELLINGTON LAKE CIRCLE  
FT MYERS, FL 33908 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            PRES  
Name            STONE, KEITH  
Address        3301 BONITA BEACH ROAD, SUITE  
                  300  
City-State-Zip: BONITA SPRINGS FL 34134

Title            VP  
Name            STONE, HEATHER  
Address        3301 BONITA BEACH ROAD, SUITE  
                  300  
City-State-Zip: BONITA SPRINGS FL 34134

Title            VP  
Name            DISQUE, DAVID  
Address        3301 BONITA BEACH ROAD, SUITE  
                  300  
City-State-Zip: BONITA SPRINGS FL 34134

Title            CFO  
Name            GIACHETTI, LYNN  
Address        3301 BONITA BEACH ROAD, SUITE  
                  300  
City-State-Zip: BONITA SPRINGS FL 34134

*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:** KEITH STONE

**PRESIDENT**

**03/02/2017**

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

\_\_\_\_\_  
Date