

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

**FILED**

**May 09, 2017**

**Secretary of State  
CC5340467615**

DOCUMENT# N16000006750

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

**Current Principal Place of Business:**

1227 EAST CONCORD STREET  
ORLANDO, FL 32803

**Current Mailing Address:**

1227 EAST CONCORD STREET  
ORLANDO, 32803 UN

**FEI Number: 81-3142847**

**Certificate of Status Desired: No**

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

BENITEZ, GUS R ESQ.  
1223 EAST CONCORD STREET  
ORLANDO, FL 32803 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 CHAIRMAN  
Name CRITTENDEN, EARL  
Address 116 ANNIE STREET  
City-State-Zip: ORLANDO FL 32806

Title DIRECTOR  
Name BASS, LANCE  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name FELTS, JASON  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name BENITEZ, ALY  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name BERMAN, VICKI  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name BROWN-BUTLER, CATHY  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name COSGROVE, MARK  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name COLLINS, JASON  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

**Continues on page 2**

*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: EARL CRITTENDEN**

**CHAIRMAN**

**05/09/2017**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HAGLE, SHARON  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title VC  
Name KALOGRIDIS, GEORGE  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name LAPCHICK, RICHARD  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name LONDONO, YOLANDA  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title TREASURER  
Name O'DONNELL, PATRICK  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name PATEL, YATIN  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name HIPSH, DALE  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title SECRETARY  
Name LAFFERMAN, KELLY  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name LEWIS, HILARY  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name MANDELL, BOBBY  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name SNYDER, ANDREW  
Address 1227 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803