

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N16000007717

**Entity Name:** DAN'S HANDS EDUCATION FOUNDATION INC.

**Current Principal Place of Business:**

357 SOUTH MILL VIEW WAY  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

357 SOUTH MILL VIEW WAY  
PONTE VEDRA BEACH, FL 32082

**FEI Number:** 47-1536435

**Certificate of Status Desired:** Yes

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

MALY, HENRY R  
357 SOUTH MILL VIEW WAY  
PONTE VEDRA BEACH, FL 32082 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 MALY, HENRY R  
Address 357 SOUTH MILL VIEW WAY  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title VP  
Name CABRAL-MALY, MARGARITA A DR.  
Address 357 SOUTH MILL VIEW WAY  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title TREA  
Name YOUNG, ALEASE  
Address 2989 COVENANT COVE DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

Title DIR  
Name MALY, TIMOTHY M  
Address 517 SOUTHELMWOOD AVENUE  
City-State-Zip: OAK PARK IL 60304

Title DIR  
Name MALY, MATTHEW H  
Address 5221 WOODLAWN BLVD.  
City-State-Zip: MINNEAPOLIS MN 55417

Title DIR  
Name MALY, MICHAEL T DR.  
Address 3201 MAPLE AVENUE  
City-State-Zip: BROOKFIELD IL 60513

*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:** HENRY R. MALY

**PRESIDENT**

**10/27/2021**

Electronic Signature of Signing Officer/Director Detail

Date