# 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N16000010427

Entity Name: WINKLER'S WISH FOUNDATION, INC.

### **Current Principal Place of Business:**

458 JILLIAN DRIVE CRESTVIEW, FL 32536

## **Current Mailing Address:**

2260 S. FERDON BLVD PO BOX 263 CRESTVIEW, FL 32536 US

## FEI Number: 81-4249910

### Name and Address of Current Registered Agent:

WINKLER, REBECCA LYNN 458 JILLIAN DRIVE CRESTVIEW, FL 32536 US Secretary of State CC1101783632

FILED Apr 17, 2018

Certificate of Status Desired: No

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	REBECCA L. WINKLER			04/17/2018
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	PRESIDENT, CHAIRMAN	Title	VP, DIRECTOR	
Name	WINKLER, REBECCA	Name	WINKLER, RICHARD	
Address	458 JILLIAN DRIVE	Address	458 JILLIAN DRIVE	
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32536	
Title	SECRETARY	Title	TREASURER	
Name	REYNOLDS, TAYQUOYAH	Name	THOMPSON, ANISSA	
Address	458 JILLIAN DRIVE	Address	458 JILLIAN DRIVE	
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32536	
Title	DIRECTOR	Title	DIRECTOR	
Name	WINKLER, COREY	Name	WINKLER, CRAIG	
Address	458 JILLIAN DRIVE	Address	458 JILLIAN DRIVE	
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32536	
Title	DIRECTOR	Title	DIRECTOR	
Name	FOUQUET, JEREMY	Name	GUIRAO, CRYSTAL	
Address	458 JILLIAN DRIVE	Address	458 JILLIAN DRIVE	
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32536	

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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: REBECCA L WINKLER

PRESIDENT, CHAIRMAN 04/17/2018

Electronic Signature of Signing Officer/Director Detail

Date

## **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	COOPER, GRADY	Name	HARSHMAN, BOB
Address	458 JILLIAN DRIVE	Address	458 JILLIAN DRIVE
City-State-Zip:	CRESTVIEW FL 32536	City-State-Zip:	CRESTVIEW FL 32536