

**2017 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:**P.O. BOX 263  
CRESTVIEW, FL 32536 US**FEI Number: 81-4249910****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD., SUITE A  
TAMPA, FL 33612 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            PRESIDENT, CHAIRMAN  
Name            WINKLER, REBECCA  
Address        458 JILLIAN DRIVE  
City-State-Zip: CRESTVIEW FL 32536

Title            DIRECTOR  
Name            WINKLER, COREY  
Address        458 JILLIAN DRIVE  
City-State-Zip: CRESTVIEW FL 32536

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

Title            VP, DIRECTOR  
Name            WINKLER, RICHARD  
Address        458 JILLIAN DRIVE  
City-State-Zip: CRESTVIEW FL 32536

Title            DIRECTOR  
Name            WINKLER, CRAIG  
Address        458 JILLIAN DRIVE  
City-State-Zip: CRESTVIEW FL 32536

Title            SECRETARY  
Name            REYNOLDS, TAYQUOYAH  
Address        458 JILLIAN DRIVE  
City-State-Zip: CRESTVIEW FL 32536

Title            TREASURER  
Name            THOMPSON, ANISSA  
Address        458 JILLIAN DRIVE  
City-State-Zip: CRESTVIEW FL 32536

Title            DIRECTOR  
Name            FOUQUET, JEREMY  
Address        458 JILLIAN DRIVE  
City-State-Zip: CRESTVIEW FL 32536

**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: REBECCA WINKLER****PRESIDENT, BOARD  
CHAIRMAN****03/19/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

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

Title                 DIRECTOR  
Name                GUIRAO, CRYSTAL  
Address             458 JILLIAN DRIVE  
City-State-Zip:    CRESTVIEW FL 32536