

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000002768

**Entity Name:** FREE ALL CAPTIVE ELEPHANTS, INC.**Current Principal Place of Business:**425 PARK AVE.  
SATELLITE BCH., FL 32937**Current Mailing Address:**1071 S. PATRICK DR., STE. 372722  
SATELLITE BCH., FL 32937 US**FEI Number:** 82-0815762**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GAUG, DENISE  
425 PARK AVE.  
SATELLITE BCH., FL 32937 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	D/T	Title	D
Name	WEINRICH, MICHELLE	Name	POSSENTI, ADRIENNE
Address	1010 ANTLER DR.	Address	51 N. BREWSTER RD
City-State-Zip:	GLENMILLS PA 19342	City-State-Zip:	VINELAND NJ
Title	S	Title	VTD
Name	COLLINS, JUDY	Name	VITULLE, ROBIN
Address	95 CONVERSE AVENUE	Address	3 SHIPMASTER DRIVE
City-State-Zip:	MALDEN MA 02148	City-State-Zip:	BRIGANTINE NJ 08203
Title	PSD	Title	S
Name	GAUG, DENISE	Name	POSSENTI, ADRIENNE
Address	425 PARK AVENUE	Address	51 N. BREWSTER ROAD
City-State-Zip:	SATELLITE BCH. FL 32937	City-State-Zip:	VINELAND NJ 08361
Title	DIRECTOR		
Name	KRAMER, CRYSTAL		
Address	425 PARK AVE.		
City-State-Zip:	SATELLITE BCH. FL 32937		

*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:** DENISE GAUG**PRESIDENT****03/17/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date