

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000004285

**FILED**  
**Feb 13, 2018**  
**Secretary of State**  
**CC9888642952**

**Entity Name:** CHAPTER 1 FOUNDATION INC.

**Current Principal Place of Business:**

47 SE BEECHTREE LANE  
STUART, FL 34994

**Current Mailing Address:**

PO BOX 1976  
STUART, FL 34995 US

**FEI Number: 82-1226633**

**Certificate of Status Desired: No**

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

MARTIN, TRAVIS M  
47 SE BEECH TREE LANE  
STUART, FL 34994 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 P  
Name MARTIN, TRAVIS M  
Address 47 SE BEECH TREE LANE  
City-State-Zip: STUART FL 34994

Title SECRETARY, DIRECTOR  
Name MACCONNELL, EMILY  
Address 12625 83RD ST.  
City-State-Zip: FELLSMERE FL 32948

Title TREASURER, DIRECTOR  
Name HESTER, BRIAN  
Address 10632 PINECONE LN  
City-State-Zip: FT PIERCE FL 34945

Title DIRECTOR  
Name NEWPORT, MARTI  
Address 213 SW HIDE PLACE  
City-State-Zip: PORT SAINT LUCIE FL 34953

Title DIRECTOR  
Name SHEELAR, CYNTHIA  
Address 3181 LINDA VISTA AVE.  
City-State-Zip: FORT PIERCE FL 34982

*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: TRAVIS MARTIN**

**PRESIDENT**

**02/13/2018**

Electronic Signature of Signing Officer/Director Detail

Date