

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000011068

**Entity Name:** JOEY'S LEGACY, INC.

**Current Principal Place of Business:**

121 NORTHPOINT DRIVE  
APT 1610  
LEXINGTON, SC 29072

**FILED**  
**Jan 25, 2023**  
**Secretary of State**  
**3519185364CC**

**Current Mailing Address:**

121 NORTHPOINT DRIVE  
1610  
LEXINGTON, SC 29072 US

**FEI Number:** 82-3308803

**Certificate of Status Desired:** No

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

L TURNER LAW PA  
85 SE 4TH AVE  
108  
DELRAY BEACH, FL 33483 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:** LAUREN TURNER, ESQ.

01/25/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title FOUNDER/PRESIDENT  
Name FINE, SCOTT M  
Address 121 NORTHPOINT DRIVE  
1610  
City-State-Zip: LEXINGTON SC 29072

Title TREASURER  
Name FINE, DEBBIE L  
Address 121 NORTHPOINT DRIVE  
1610  
City-State-Zip: LEXINGTON SC 29072

Title VP  
Name WARE, JODI  
Address 2010 RIVERGLEN FOREST DRIVE  
City-State-Zip: KINGWOOD TX 77345

Title DIRECTOR  
Name MORTISE, KIM  
Address 3315 BASELINE ROAD  
City-State-Zip: GRAND ISLAND NY 14072

Title DIRECTOR  
Name FRIES, STEVEN  
Address 3253 PELAS CIRCLE  
City-State-Zip: FORT MYERS FL 33917

Title DIRECTOR  
Name ROBB, JERRY L  
Address 3328 E WHIPPOORWILL DRIVE  
City-State-Zip: DULUTH GA 30096

Title DIRECTOR  
Name CANNIZZARO, DVM, ROBIN  
Address 26139 HALSEY ROAD  
City-State-Zip: BROOKSVILLE FL 34601

Title DIRECTOR  
Name HOYT, ESQ., PEGGY  
Address 254 PLAZA DRIVE  
City-State-Zip: OVIEDO FL 32765

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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:** SCOTT FINE

PRESIDENT

01/25/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MORRISON-RICORDATI, ESQ., ANNA  
Address 134 NORTH LASALLE ST, NINTH FLOOR  
City-State-Zip: CHICAGO IL 60602

Title DIRECTOR  
Name GRUCCIO, LISA  
Address 9933 FLORAL PARK LANE  
City-State-Zip: BOCA RATON FL 33428

Title DIRECTOR  
Name MAHONEY, STEPHANIE  
Address 5060 EAGLE HEAD CT. NE  
City-State-Zip: CLEVELAND TN 37312

Title DIRECTOR  
Name BERGSTEN, ESQ., KRISTINA  
Address 2216 JOLIET ST.  
City-State-Zip: AURORA CO 80010

Title DIRECTOR  
Name SHARON, KRISTIE  
Address 3103 EUGENE LANE  
City-State-Zip: AURORA IL 60504