#### 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: LAUREN NICOLE JOHNSON

Electronic Signature of Signing Officer/Director Detail

# 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N18000004857

Entity Name: EMPOWERMENT FOUNDATION, INC.

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

160 COMMONWEALTH CT. N. ST. PETERSBURG, FL 33716

### **Current Mailing Address:**

160 COMMONWEALTH CT. N. ST. PETERSBURG, FL 33716 US

## FEI Number: 32-0574307

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

JOHNSON, LAUREN NICOLE 160 COMMONWEALTH CT. N. ST. PETERSBURG, FL 33716 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

# **Officer/Director Detail :**

Title	D	Title	D
Name	JOHNSON, LAUREN NICOLE	Name	JOHNSON, GEORGE
Address	160 COMMONWEALTH CT. N.	Address	14360 84TH TERRACE NORTH
City-State-Zip:	ST. PETERSBURG FL 33716	City-State-Zip:	SEMINOLE FL 33776
Title	D		
The	D		
Name	LLOYD, EMILY		
Address	2674 FIRESTONE DRIVE		

03/02/2022

FILED Mar 02, 2022 Secretary of State 0693257975CC

Certificate of Status Desired: No

DIRECTOR

Date

Date