

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000011196

**Entity Name:** THE T & S HEROES, INC.

**Current Principal Place of Business:**

9526 ARGYLE FOREST BLVD., STE. B2, #303  
JACKSONVILLE, FL 32222

**Current Mailing Address:**

9526 ARGYLE FOREST BLVD., STE. B2, #303  
JACKSONVILLE, FL 32222

**FEI Number: 83-2503944**

**Certificate of Status Desired: Yes**

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

POWERHOUSE ANCHOR MANAGEMENT CONSULTING  
6620 SOUTHPOINT DRIVE S  
SUITE 511  
JACKSONVILLE, FL 32216 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: ETHELBERT NWANEGBO**

**01/26/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name STEPHENS, TED SR.  
Address 9955 KINGS CROSSING DR.  
City-State-Zip: JACKSONVILLE FL 32219

Title VP  
Name STEPHENS, SHAWNDA G  
Address 9955 KINGS CROSSING DR.  
City-State-Zip: JACKSONVILLE FL 32219

Title T  
Name BUTLER, ESTHER  
Address 1583 LANGSTON DR.  
City-State-Zip: JOHNS ISLAND SC 29455

Title S  
Name SIMMONS, ANGELIC  
Address 1583 LANGSTON DR.  
City-State-Zip: JOHNS ISLAND SC 29455

Title D  
Name STEPHENS, GRADY  
Address 2676 CLEAR STREAM RDG.  
City-State-Zip: AUBURN GA 30011

Title O  
Name GILCHRIST, SHANEE D  
Address 9955 KINGS CROSSING DR.  
City-State-Zip: JACKSONVILLE FL 32219

*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: SHAWNDA STEPHENS**

**VP**

**01/26/2022**

Electronic Signature of Signing Officer/Director Detail

Date