# 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.

CEO

#### SIGNATURE: KENDALL WATSON

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

### **Officer/Director Detail :**

Title	Ρ	Title	VP
Name	WATSON, KENDALL	Name	WATSON, KIMBERLY
Address	2737 LEMON STREET	Address	2737 LEMON STREET
City-State-Zip:	FORT MYERS FL 33916	City-State-Zip:	FORT MYERS FL 33916
Title	VP		
Name	HOWARD, STACY		
Address	2737 LEMON STREET-		
City-State-Zip:	FORT MYERS FL 33916		

## Name and Address of Current Registered Agent:

WATSON, KIMBERLY 2737 LEMON STREET FORT MYERS, FL 33916 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.

# FORT MYERS. AL 33916

#### **Current Mailing Address:**

## DOCUMENT# N19000001840

### Entity Name: BEYOND THE LIGHTS FOUNDATION INC

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

3903 DR. MARTIN LUTHER KING JR. BLVD

3903 DR. MARTIN LUTHER KING JR. BLVD FORT MYERS. AL 33916 US

### FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

FILED Feb 03, 2021 Secretary of State 9368275182CC

02/03/2021

Date

Date