

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000009030

**Entity Name:** END HUMAN TRAFFICKING, INC.**Current Principal Place of Business:**1400 VILLAGE SQUARE BLVD., SUITE 3-110  
TALLAHASSEE, FL 32312**Current Mailing Address:**1400 VILLAGE SQUARE BLVD., SUITE 3-110  
TALLAHASSEE, FL 32312 US**FEI Number:** 32-0611684**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARTIN, RICHARD H  
PL-01, THE CAPITOL  
TALLAHASSEE, FL 32399 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	D
Name	BOOK, LAUREN
Address	967 N. NOB HILL ROAD
City-State-Zip:	PLANTATION FL 33324

Title	D
Name	AZINGER, TONI
Address	8910 21 AVE. NW
City-State-Zip:	BRADENTON FL 34209

Title	D
Name	PARVU, SAVANNAH
Address	P.O. BOX 1053
City-State-Zip:	UMATILLA FL 32784

Title	D
Name	POLLARD, VADEN "SHANE"
Address	4700 TERMINAL DRIVE STE. 1
City-State-Zip:	FORT MYERS FL 33907

Title	D
Name	BOGDANOFF, ELLYN
Address	1 E. BROWARD BLVD., 18TH FLOOR
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	D
Name	OVERDORF, TOBY
Address	313 SOUTHWEST ALBANY AVE.
City-State-Zip:	STUART FL 34994

Title	D
Name	TOAL, PHILIP DR.
Address	2348 WHITEHALL DRIVE
City-State-Zip:	WINTER PARK FL 32792

Title	D
Name	WILKETT, ALAN
Address	12155 BAXLEY ST.
City-State-Zip:	SPRING HILL FL 34609

**Continues on page 2**

*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:** ELLYN BOGDANOFF**CHAIR****04/26/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title D  
Name FITZENHAGEN, HEATHER  
Address 2120 MAIN STREET, SUITE 208  
City-State-Zip: FORT MYERS FL 33901

Title D  
Name MAHONEY, SARA  
Address 16603 MILLAN DE AVILA  
City-State-Zip: TAMPA FL 33613-0000

Title D  
Name MCGILLICUDDY, GRACIELA  
Address 3827 FLAMINGO AVENUE  
City-State-Zip: SARASOTA FL 34242