## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000009428

Entity Name: COMFORT CRUSADERS, INC.

**Current Principal Place of Business:** 

8150 PONCE DE LEON ROAD

CORAL GABLES. FL 33143

**Current Mailing Address:** 

8150 PONCE DE LEON ROAD CORAL GABLES. FL 33143 US

FEI Number: 84-2989857 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MALOOF, MARIA 8150 PONCE DE LEON ROAD CORAL GABLES, FL 33143 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: MARIA MALOOF 01/19/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIR, PRESIDENT Title DIR, VP

MALOOF, MARIA Name RETTIG, PRISCILLA Name

8150 PONCE DE LEON ROAD Address 8150 PONCE DE LEON ROAD Address

City-State-Zip: CORAL GABLES FL 33143 CORAL GABLES FL 33143 City-State-Zip:

Title **SECRETARY** Title DIR, TREASURER

Name BERDELLANS, MEGHAN MALOOF Name SARKISIAN, KIM

8150 PONCE DE LEON ROAD Address Address 8150 PONCE DE LEON ROAD CORAL GABLES FL 33143 City-State-Zip: City-State-Zip: CORAL GABLES FL 33143

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.

01/19/2024 SIGNATURE: MARIA MALOOF **PRESIDENT** 

**FILED** Jan 19, 2024

**Secretary of State** 

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