

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

DOCUMENT# N19000011895

**Entity Name:** CHADDAH, INC.

**Current Principal Place of Business:**

6231 NW ST  
PENSACOLA, FL 32505

**Current Mailing Address:**

6231 NW ST  
PENSACOLA, FL 32505 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

KERRY ANNE SCHULTZ, ESQUIRE  
2779 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 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 AMY JO PERNIE  
Address 6829 RICKWOOD DR  
City-State-Zip: PENSACOLA FL 32526

Title D  
Name TIMOTHY JOSEPH PERNIE  
Address 6829 RICKWOOD DR  
City-State-Zip: PENSACOLA FL 32526

Title D  
Name CRANE, JAMES  
Address 2355 SCNIC HWY  
City-State-Zip: PENSACOLA FL 32503

Title TREASURER  
Name MROZ, PAM  
Address 6231 NW ST  
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR  
Name MROZ, KEVIN  
Address 6231 NW ST  
City-State-Zip: PENSACOLA FL 32505

*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:** CRANE , JAMES

D

04/30/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date