

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000012506

**Entity Name:** ROSSI FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

959 EXPLORER COVE, SUITE 101  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

959 EXPLORER COVE, SUITE 101  
ALTAMONTE SPRINGS, FL 32701

**FEI Number: 84-3996146**

**Certificate of Status Desired: No**

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

WEATHERFORD, WILLIAM P JR.  
1150 LOUISIANA AVENUE, SUITE 4  
WINTER PARK, FL 32789 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 ROSSI, TONY  
Address 959 EXPLORER COVE, SUITE 101  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title D  
Name ROSSI, DEBORAH  
Address 959 EXPLORER COVE, SUITE 101  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title D  
Name NORMANN, BRIAN  
Address 1311 EAST GORE STREET  
City-State-Zip: ORLANDO FL 32806

*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: TONY ROSSI**

**DIRECTOR**

**03/19/2020**

Electronic Signature of Signing Officer/Director Detail

Date