## 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.

Ρ

SIGNATURE: GONZALEZ, JUAN P

Electronic Signature of Signing Officer/Director Detail

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000012661

Entity Name: GONZALEZ & GARCES FOUNDATION INC

#### **Current Principal Place of Business:**

1063 TWIN BRANCH LN WESTON, FL 33326

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

1063 TWIN BRANCH LN WESTON, FL 33326 US

#### FEI Number: 85-3845523

# Name and Address of Current Registered Agent:

GONZALEZ, JUAN P 1063 TWIN BRANCH LN WESTON, FL 33326 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

## **Officer/Director Detail :**

Title	Р	Title	VP
Name	GONZALEZ, JUAN P	Name	CAROLINA GARCES, MARIA
Address	1063 TWIN BRANCH LN	Address	1063 TWIN BRANCH LN
City-State-Zip:	WESTON FL 33326	City-State-Zip:	WESTON FL 33326

04/22/2024

FILED Apr 22, 2024 Secretary of State 3616701716CC

Date

Certificate of Status Desired: No

Date