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2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE D.R.I.P. WAY FOUNDATION, INC.

Current Principal Place of Business:

1830 N. UNIVERSITY DRIVE, SUITE 252 PLANTATION, FL 33322

Current Mailing Address:

1830 N. UNIVERSITY DRIVE, SUITE 252 PLANTATION, FL 33322

FEI Number: 85-4028201

Name and Address of Current Registered Agent:

FRANKLIN, JOHN III 1830 N. UNIVERSITY DRIVE, SUITE 252 PLANTATION, FL 33322 US

Date

Certificate of Status Desired: No

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	PD	Title	VPD	
	Name	FRANKLIN, JOHN III	Name	FRANKLIN, JOHN JR.	
	Address	1830 N. UNIVERSITY DRIVE, SUITE 252	Address	1830 N. UNIVERSITY DRIVE, SUITE 252	
	City-State-Zip:	PLANTATION FL 33322	City-State-Zip:	PLANTATION FL 33322	
	Title	TD	Title	D	
	Name	FRANKLIN, KEALER	Name	BEVILL, STEPHANIE	
	Address	1830 N. UNIVERSITY DRIVE, SUITE	Address	4620 W. 19TH STREET	
	City-State-Zip:	252 PLANTATION FL 33322	City-State-Zip:	WEST PARK FL 33023	
	Title	D	Title	D	
	Name	PEARMAN, DEREK	Name	HIRSCH, DWAYNE	
	Address	18815 HOLLYBANK PATH	Address	PO BOX 266	
	City-State-Zip:	DAVIDSON NC 28036	City-State-Zip:	METTER GA 30439	
			Title	DIRECTOR	
	Title	DIRECTOR BROWN-WILLIAMS, MYRA	Name	TIGER, CLYDE	
	Name		Address	6566 N SELVITZ RD	
	Address	4510 SW 21ST STREET	City-State-Zip:	PORT SAINT LUCIE FL 34983	
	City-State-Zip:	WEST PARK FL 33023			
			Continues on nage 2		

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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: JOHN FRANKLIN III

PRESIDENT

03/10/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ASST. SECRETARY	Title	DIRECTOR
Name	QUALLO-LANGE, MARCIA	Name	GREEN, CHRISTOPHER
Address	1430 SW 66TH TERRACE	Address	170 NE 2ND ST
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	BOCA RATON FL 33432