

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000007732

**Entity Name:** MENTORS FOR THE KIDS FOUNDATION

**Current Principal Place of Business:**

9242 CASTLEBAR GLEN DRIVE  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

9242 CASTLEBAR GLEN DRIVE  
JACKSONVILLE, FL 32256 US

**FEI Number:** 86-3242216

**Certificate of Status Desired:** No

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

CHRISTIE, BRITTANY  
1211 LIMESTONE STREET  
TALLAHASSEE, FL 32311 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 P  
Name COLEMAN, JAMES  
Address 9242 CASTLE BAR GLEN DRIVE  
City-State-Zip: JACKSONVILLE FL 32256

Title S  
Name FREEMAN, TERRANCE  
Address 1243 GORHAM ST  
City-State-Zip: JACKSONVILLE FL 32226

Title T  
Name GONZALES, BOBBY  
Address 12349 WINTERPINE CT  
City-State-Zip: JACKSONVILLE FL 32225

Title C  
Name COLEMAN, CARMEN  
Address 1693 RODEO DR.  
City-State-Zip: TALLAHASSEE FL 32311

*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:** JAMES COLEMAN

**CEO**

**04/30/2024**

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

\_\_\_\_\_  
Date