

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23000008873

Entity Name: GARLAND V. STEWART FOUNDATION INC.**Current Principal Place of Business:**3415 DELEUIL AVE
TAMPA, FL 33610**Current Mailing Address:**P.O. BOX 75717
TAMPA, FL 33675 US**FEI Number:** 93-2579547**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARLAND V STEWART FOUNDATION
3415 DELEUIL AVE
TAMPA, FL 33610 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:** REV DR AILES

04/21/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	I
Name	FERGUSON, AVON
Address	P.O. BOX 75717
City-State-Zip:	TAMPA FL 33675

Title	I
Name	AILES, EMERY REV DR
Address	BOX 75717
City-State-Zip:	TAMPA FL 33675

Title	C
Name	MANNING, DARRYL
Address	PO BOX 26916
City-State-Zip:	TAMPA FL 33626

Title	VC
Name	SPARKS, TED
Address	14772 SAN MARSALA COURT
City-State-Zip:	TAMPA FL 33626

Title	TREASURER
Name	HADLEY, PHILLIP
Address	306 N HABANA AVE
City-State-Zip:	TAMPA FL 33609

Title	S
Name	MALLORY, DEWAYNE
Address	P.O. BOX 75717
City-State-Zip:	TAMPA FL 33675

Title	D
Name	HALL, CRAIG SR.
Address	P.O. BOX 75717
City-State-Zip:	TAMPA FL 33675

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: REV DR EMERY AILES**INCORPORATOR**

04/21/2025

Electronic Signature of Signing Officer/Director Detail

Date