

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

DOCUMENT# N23000010207

**Entity Name:** LITTLE LIFE AID FOUNDATION, INC.

**Current Principal Place of Business:**

3866 SE OLD ST. LUCIE BLVD  
STUART, FL 34996

**Current Mailing Address:**

3866 SE OLD ST. LUCIE BLVD  
STUART, FL 34996

**FEI Number:** 93-3289876

**Certificate of Status Desired:** No

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

LAW OFFICES OF ERIC MASSON, PLLC  
19433 NW 23RD ST  
PEMBROKE PINES, FL 33029 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 POLHEMUS, ZUSANNE  
Address 3866 SE OLD ST. LUCIE BLVD  
City-State-Zip: STUART FL 34996

Title VP  
Name SCHROEDER, ROSALIND  
Address 801 SW BAY POINTE CIR  
City-State-Zip: PALM CITY FL 34990

Title S  
Name SLOWIKOWSKI, WYNNE  
Address 1017 BLUESTONE WAY  
City-State-Zip: BIRMINGHAM AL 35242

*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:** ROSALIND SCHROEDER

VP

03/08/2024

Electronic Signature of Signing Officer/Director Detail

Date