

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41448

Entity Name: ESCAMBIA COUNTY 4-H FOUNDATION, INC.**Current Principal Place of Business:**3740 STEFANI RD
CANTONMENT, FL 32533**Current Mailing Address:**3740 STEFANI RD
CANTONMENT, FL 32533 US**FEI Number:** 59-3041362**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIMMONS, NICHOLAS B CED
3740 STEFANI ROAD
CANTONMENT, FL 32533 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:** NICHOLAS B. SIMMONS

01/21/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BELL, BRIAN
Address 359 BUNKER HILL ROAD
City-State-Zip: PENSACOLA FL 32506

Title PRESIDENT
Name PETERSON, ANNE
Address 4711 CRARY RD
City-State-Zip: CENTURY FL 32535

Title SECRETARY
Name MORGAN, LESA
Address 30 EAST TEXTAR ST
City-State-Zip: PENSACOLA FL 32503

Title COUNTY EXTENSION DIRECTOR
Name SIMMONS, NICHOLAS B
Address 2162 PADDLEWHEEL WAY
City-State-Zip: CANTONMENT FL 32533

Title VP
Name GILMORE, JACOB
Address 8284 GILMORE ROAD
City-State-Zip: MOLINO FL 32577

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: NICHOLAS SIMMONS**COUNT EXTENSION
DIRECTOR**

01/21/2021

Electronic Signature of Signing Officer/Director Detail

Date