#### 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: MICHAEL A. THORNTON

TAMPA FL 33634

5915 BENJAMIN CENTER DRIVE

Electronic Signature of Signing Officer/Director Detail

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: AMIKIDS FOUNDATION, INC.

#### **Current Principal Place of Business:**

5915 BENJAMIN CENTER DRIVE TAMPA FL 33634

## **Current Mailing Address:**

5915 BENJAMIN CENTER DRIVE AMIKIDS, INC. TAMPA, FL 33634 US

## FEI Number: 59-3095734

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

HULL, DAVID J ONE INDEPENDENT DRIVE **SUITE 3300** JACKSONVILLE, FL 32202 US

Date

Certificate of Status Desired: Yes

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:

Address

City-State-Zip:

Electronic Signature of Registered Agent

# **Officer/Director Detail :**

Title	D	Title	D
Name	THOMPSON, DANIEL J	Name	THOMAS, NEWTON
Address	2150 WRIGHTS MILL CR	Address	8183 EL CAJON DRIVE
City-State-Zip:	ATLANTA GA 30224	City-State-Zip:	BATON ROUGE LA 70815
Title	D	Title	D
Name	STANDER, O.B.	Name	THORNTON, MICHAEL A.
Address	5915 BENJAMIN CENTER DRIVE	Address	5915 BENJAMIN CENTER DRIVE
City-State-Zip:	TAMPA FL 33634	City-State-Zip:	TAMPA FL 33634
Title	D	Title	D
Name	CRISER, MARK	Name	METHENY, MARVIN L.
Address	5915 BENJAMIN CENTER DRIVE	Address	5915 BENJAMIN CENTER DRIVE
City-State-Zip:	TAMPA FL 33634	City-State-Zip:	TAMPA FL 33634
Title	D		
Name	PETREY, ROD		

06/30/2020 DIRECTOR

Date