## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002736

Entity Name: ATAXIA TELANGIECTASIA CHILDREN'S PROJECT, INC.

FILED
Jan 15, 2020
Secretary of State
5539944841CC

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

5300 W. HILLSBORO BLVD.

SUITE 105

COCONUT CREEK, FL 33073

## **Current Mailing Address:**

5300 W. HILLSBORO BLVD. SUITE 105

COCONUT CREEK, FL 33073 US

FEI Number: 65-0427215 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

MARGUS, BRADLEY A 5300 W. HILLSBORO BLVD. SUITE 105

COCONUT CREEK, FL 33073 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 D Title D

Name MADISON, AMY Name JEHLIK, GREG

Address 5300 W. HILLSBORO BLVD., SUITE Address 5300 W. HILLSBORO BLVD. SUITE 105

105

City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip: COCONUT CREEK FL 33073

Title D Title D

Name MARGUS, BRADLEY A Name FEELEY, JOHN D

Address 5300 W. HILLSBORO BLVD. SUITE 105 Address 5300 W. HILLSBORO BLVD. SUITE 105

City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip: COCONUT CREEK FL 33073

Title DIRECTOR

Name THORNTON, JENNIFER
Address 5300 W. HILLSBORO BLVD.

SUITE 105

City-State-Zip: COCONUT CREEK FL 33073

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.