

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000000987

**Entity Name:** THE WILLIAM J. VON LIEBIG FOUNDATION INC.

**FILED**  
**Feb 25, 2020**  
**Secretary of State**  
**1373442557CC**

**Current Principal Place of Business:**

C/O SUZANNE VON LIEBIG  
969 FIFTH AVENUE 5TH FLOOR  
NEW YORK, NY 10075

**Current Mailing Address:**

C/O LYNN COLEMAN  
P.O. BOX 65  
BELLEVIEW, FL 34421 US

**FEI Number: 31-1470886**

**Certificate of Status Desired: No**

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

PASSIDOMO, JOHN M ESQ.  
821 FIFTH AVENUE SOUTH  
NAPLES, FL 34102 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:** JOHN M. PASSIDOMO

02/25/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DPST  
Name VON LIEBIG, SUZANNE  
Address P.O. BOX 65  
City-State-Zip: BELLEVIEW FL 34421

Title DIRECTOR, VICE-PRESIDENT  
Name ENNIS, MICHAEL  
Address P.O. BOX 65  
City-State-Zip: BELLEVIEW FL 34421

Title DIRECTOR  
Name DIMOND, SCOTT  
Address P.O. BOX 65  
City-State-Zip: BELLEVIEW FL 34421

*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:** SUZANNE VON LIEBIG

**PRESIDENT**

02/25/2020

Electronic Signature of Signing Officer/Director Detail

Date