

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006362

Entity Name: THE CANTERBURY SCHOOL OF FLORIDA FOUNDATION, INC.**Current Principal Place of Business:**990 62ND AVENUE NE
ST PETERSBURG, FL 33702**Current Mailing Address:**990 62ND AVENUE NE
ST PETERSBURG, FL 33702**FEI Number: 59-3533962****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HALL, MAC H
990 62ND AVENUE NE
ST PETERSBURG, FL 33702 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	PRESIDENT
Name	DOBIESZ, MAUREEN
Address	739 GALEON DRIVE
City-State-Zip:	TIERRA VERDE FL 33715

Title	TREASURER
Name	MCMULLEN, STEVE
Address	690 APALACHEE CIRCLE NE
City-State-Zip:	ST PETERSBURG FL 33702

Title	SECRETARY
Name	MCQUEEN, BILL
Address	121 BAY POINT DRIVE NE
City-State-Zip:	ST PETERSBURG FL 33704

Title	DIRECTOR
Name	HALE, MARION ESQ.
Address	7201 DEMENS DR. S
City-State-Zip:	ST PETERSBUG FL 33712

Title	DIRECTOR
Name	CAROTHERS-SMITH, SUSAN
Address	902 MARCO DR NE
City-State-Zip:	ST PETERSBURG FL 33702

Title	VP
Name	HANNA, MIKE
Address	9270 SAN MARTIN BLVD
City-State-Zip:	ST. PETERSBURG FL 33702

Title	DIRECTOR
Name	BETZER, PETER
Address	1830 CRESCENT LAKE DR
City-State-Zip:	ST PETERSBURG FL 33704

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: MAUREEN DOBIESZ**PRESIDENT****01/21/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date