2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004203

Entity Name: WYCLIFFE ASSOCIATES, INC.

Current Principal Place of Business:

11450 TRANSLATION WAY ORLANDO, FL 32832

Current Mailing Address:

PO BOX 620143 ORLANDO, FL 32862

FEI Number: 95-2584324

Name and Address of Current Registered Agent:

BOYLES, WILLIAM A 301 E. PINE STREET, SUITE 1400 ORLANDO, FL 32801 US Secretary of State 4404890110CC

Date

FILED Feb 25, 2022

Certificate of Status Desired: No

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

Officer/Director Detail :

	Title	DIRECTOR, CHAIRMAN	Title	PRESIDENT
	Name	ALLEN, LINDA	Name	UNG, SIMOUN
	Address	11450 TRANSLATION WAY	Address	11450 TRANSLATION WAY
	City-State-Zip:	ORLANDO FL 32832	City-State-Zip:	ORLANDO FL 32832
	Title Name	DIRECTOR KOUYATE, SOULEYMANE	Title Name	CFO BROWN, SCOTT
	Address	11450 TRANSLATION WAY	Address	11450 TRANSLATION WAY
			City-State-Zip:	ORLANDO FL 32832
	City-State-Zip:	ORLANDO FL 32832	City-State-Zip.	OREANDO PE 32832
	Title	DIRECTOR	Title	DIRECTOR
	Title Name	DIRECTOR HAWKINS, CINDY	Title Name	DIRECTOR PANYA, STEPHEN
	Name	HAWKINS, CINDY 11450 TRANSLATION WAY	Name	PANYA, STEPHEN
	Name Address	HAWKINS, CINDY 11450 TRANSLATION WAY	Name Address	PANYA, STEPHEN 11450 TRANSLATION WAY ORLANDO FL 32832 DIRECTOR, SECRETARY AND TREASURER
	Name Address City-State-Zip: Title	HAWKINS, CINDY 11450 TRANSLATION WAY ORLANDO FL 32832 DIRECTOR, VC	Name Address City-State-Zip: Title Name	PANYA, STEPHEN 11450 TRANSLATION WAY ORLANDO FL 32832 DIRECTOR, SECRETARY AND TREASURER MAGILL, CHRIS
	Name Address City-State-Zip: Title Name	HAWKINS, CINDY 11450 TRANSLATION WAY ORLANDO FL 32832 DIRECTOR, VC STULP, GAY ELLEN 11450 TRANSLATION WAY	Name Address City-State-Zip: Title	PANYA, STEPHEN 11450 TRANSLATION WAY ORLANDO FL 32832 DIRECTOR, SECRETARY AND TREASURER

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: SCOTT BROWN

CFO

02/25/2022

Electronic Signature of Signing Officer/Director Detail

Date