

2023 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

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYLES, WILLIAM A
301 E. PINE STREET, SUITE 1400
ORLANDO, FL 32801 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 DIRECTOR, CHAIRMAN
Name ALLEN, LINDA
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

Title PRESIDENT
Name UNG, SIMOUN
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

Title DIRECTOR
Name KOUYATE, SOULEYMANE
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

Title CFO
Name BROWN, SCOTT
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

Title DIRECTOR
Name HAWKINS, CINDY
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

Title DIRECTOR
Name PANYA, STEPHEN
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

Title DIRECTOR, VC
Name STULP, GAY ELLEN
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

Title DIRECTOR, SECRETARY AND
TREASURER
Name MAGILL, CHRIS
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832

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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

03/22/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JONES, DON
Address 11450 TRANSLATION WAY
City-State-Zip: ORLANDO FL 32832