

**2024 FOREIGN NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 14, 2024  
Secretary of State  
1862037114CC**

DOCUMENT# F05000004292

**Entity Name:** FUTURE PROBLEM SOLVING PROGRAM INTERNATIONAL, INC.

**Current Principal Place of Business:**

225 5TH AVENUE  
SUITE 1  
INDIALANTIC, FL 32903

**Current Mailing Address:**

225 5TH AVENUE  
SUITE 1  
INDIALANTIC, FL 32903 US

**FEI Number:** 42-1234706

**Certificate of Status Desired:** Yes

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

MICHELE, APRIL A  
225 5TH AVENUE  
SUITE 1  
INDIALANTIC, FL 32903 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:** APRIL A MICHELE

06/14/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title EXECUTIVE DIRECTOR  
Name MICHELE, APRIL A  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title PRESIDENT  
Name HICKS, FLORA ARGEN  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title TREASURER  
Name HOSONO, ERWIN  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title BOARD MEMBER  
Name FITE, JANET  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title BOARD MEMBER  
Name MONKHOUSE, PETER  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title BOARD MEMBER  
Name FOREYT, ANN  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title VP  
Name STYAN, JULIE  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title BOARD MEMBER  
Name SHERMAN, DYLAN  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

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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:** DEBORAH PRUNEAU

**ADMINISTRATIVE  
DIRECTOR**

06/14/2024

**Officer/Director Detail Continued :**

Title BOARD MEMBER  
Name SIKDER, SHEFA  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title SECRETARY  
Name PETERSEN, LAUREL  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title BOARD MEMBER  
Name DIGBY, SUZANNE  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title ASSISTANT TREASURER  
Name PRUNEAU, DEBORAH  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903

Title BOARD MEMBER  
Name GENOVESE, AMANDA  
Address 225 5TH AVENUE  
SUITE 1  
City-State-Zip: INDIALANTIC FL 32903