

2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002791

FILED
Apr 01, 2020
Secretary of State
2763953564CC

Entity Name: FELLOWSHIP OF RECONCILIATION, INC.

Current Principal Place of Business:

180 W. MAIN STREET
STONY POINT, NY 10980

Current Mailing Address:

C/O SMART CHARITY
11890 SUNRISE VALLEY DRIVE, SUITE 206
RESTON, VA 20191 US

FEI Number: 13-3792144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: JANICE NULL

04/01/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title BOARD MEMBER
Name BRAGG, BRIANNA
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title CO-CHAIR
Name STONEBRAKER-MARTINEZ, CHRISSY
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title EXECUTIVE DIRECTOR
Name JORDAN-SIMPSON, EMMA REV. DR.
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title SECRETARY
Name LINDEEN, ELLEN
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title BOARD MEMBER
Name MEYER, MATT
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title TREASURER AND CO-CHAIR
Name IANCULOVICI, CIPRIAN
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title BOARD MEMBER
Name MAGNO, PAUL
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title COUNCIL CO-CHAIR
Name GOGGANS, AARON
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

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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: EMMA JORDAN-SIMPSON

**EXECUTIVE
DIRECTOR/OFFICER**

04/01/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOARD MEMBER
Name GRIMES, ANTHONY
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title BOARD MEMBER
Name ALVARADO-ARCE, LINDA
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title BOARD MEMBER
Name FABRE, SHERLY
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title BOARD MEMBER
Name LOBERG, BETHANY RENATA
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title CO-CHAIR
Name NEY, CHRIS
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title GOVERNANCE CO-CHAIR
Name BACKE, JOHN
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980

Title BOARD MEMBER
Name GONZALEZ, MIA
Address 180 W. MAIN STREET
City-State-Zip: STONY POINT NY 10980