

**2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000002724

**Entity Name:** AAAP FOUNDATION, INC.**Current Principal Place of Business:**12627 SAN JOSE BLVD., SUITE 202  
JACKSONVILLE, FL 32223-8638**Current Mailing Address:**12627 SAN JOSE BLVD., SUITE 202  
JACKSONVILLE, FL 32223-8638**FEI Number:** 23-2542890**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BEVANS-KERR, JANECE  
12627 SAN JOSE BLVD., SUITE 202  
JACKSONVILLE, FL 32223-8638 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 EXECUTIVE DIRECTOR  
Name BEVANS-KERR, BOB  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title PRESIDENT  
Name HOERR, FRED  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title EXECUTIVE VICE PRESIDENT  
Name DOUGHERTY, SUZANNE  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title PAST PRESIDENT  
Name OWEN, ROBERT  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title DIRECTOR  
Name CERVANTES, HECTOR  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title DIRECTOR  
Name GIMENO, ISABEL  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title DIRECTOR  
Name ERIC, JENSEN  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title DIRECTOR  
Name ROB, PORTER  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

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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:** BOB BEVANS-KERR**EXECUTIVE DIRECTOR****01/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SMITH, JOHN  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title DIRECTOR  
Name EVA, WALLNER-PENDLETON  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title DIRECTOR-CENTRAL  
Name BECKMAN, BERNARD  
Address 12627 SAN JOSE BLVD.  
SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223

Title DIRECTOR  
Name CRESPO, ROCIO  
Address 12627 SAN JOSE BLVD., SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223-8638

Title DIRECTOR AT LARGE  
Name MARTINE, BOULIANNE  
Address 12627 SAN JOSE BLVD.  
SUITE 202  
City-State-Zip: JACKSONVILLE FL 32223