

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000004153

**Entity Name:** FOUNDATION FOR A DRUG-FREE WORLD, INC.**Current Principal Place of Business:**1626 N. WILCOX,#1297  
LOS ANGELES, CA 90028**Current Mailing Address:**1626 N. WILCOX,#1297  
LOS ANGELES, CA 90028**FEI Number:** 20-5812172**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATHERS, JIM  
8 EVONAIRE CIRCLE  
BELLEAIR, FL 33756 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	T
Name	SHERVELL, JUDI
Address	6331 HOLLYWOOD BLVD.
City-State-Zip:	LOS ANGELES CA 90028

Title	TRUSTEE
Name	CARTWRIGHT, LARISSA
Address	6331 HOLLYWOOD
City-State-Zip:	LOS ANGELES CA 90028

Title	D, T
Name	HOCHMAN, JESSICA
Address	6331 HOLLYWOOD BLVD.
City-State-Zip:	LOS ANGELES, CA 90028

Title	T
Name	TOFIL, JOAN
Address	7065 HOLLYWOOD
City-State-Zip:	LOS ANGELES CA 90028

Title	D, P
Name	CALZOLARI, AMBRA
Address	6331 HOLLYWOOD BLVD.
City-State-Zip:	LOS ANGELES CA 90028

Title	D, S
Name	MICHEL, MARIE-CLAIRE
Address	6331 HOLLYWOOD BLVD.
City-State-Zip:	LOS ANGELES CA 90028

*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:** JUDI SHERVELL**TRUSTEE****04/25/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date