

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000002481

Entity Name: MOTHERS OUT FRONT, INC.**Current Principal Place of Business:**7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702**Current Mailing Address:**7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 US**FEI Number:** 46-5758600**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC.
7901 4TH ST N.
STE:300
ST. PETERSBURG, FL 33702 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	PRESIDENT
Name	WIRTH, KELSEY
Address	7901 4TH ST N STE 300
City-State-Zip:	ST. PETERSBURG FL 33702

Title	TREASURER, SECRETARY
Name	COCKMAN, BONNIE
Address	7901 4TH ST N STE 300
City-State-Zip:	ST. PETERSBURG FL 33702

Title	D
Name	SEVIER, ELECTA
Address	52 ELIOT ST.
City-State-Zip:	BOSTON MA 02130

Title	S
Name	JOHNSON, ELIZA
Address	99 WALLACE ST.
City-State-Zip:	SOMERVILLE MA 02144

Title	DIRECTOR
Name	SHIPP, BETH
Address	7901 4TH ST N STE 300
City-State-Zip:	ST. PETERSBURG FL 33702

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: WIRTH , KELSEY

PRESIDENT

03/03/2023

Electronic Signature of Signing Officer/Director Detail_____
Date