

**2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000001740

**Entity Name:** SUCCESS FOR ALL FOUNDATION, INC.

**Current Principal Place of Business:**

300 E. JOPPA ROAD  
SUITE 500  
BALTIMORE, MD 21286-3006

**Current Mailing Address:**

300 E. JOPPA ROAD  
SUITE 500  
BALTIMORE, MD 21286-3006 US

**FEI Number:** 52-2061820

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CD  
Name SLAVIN, ROBERT E  
Address 300 E. JOPPA ROAD  
SUITE 500  
City-State-Zip: BALTIMORE MD 21286-3006

Title PD  
Name MADDEN, NANCY A  
Address 300 E. JOPPA ROAD  
SUITE 500  
City-State-Zip: BALTIMORE MD 21286-3006

Title DIRECTOR  
Name LINK, NINA M  
Address 300 E. JOPPA ROAD  
SUITE 500  
City-State-Zip: BALTIMORE MD 21286-3006

Title D  
Name WILLIAMS, MYRA  
Address 300 E. JOPPA ROAD  
SUITE 500  
City-State-Zip: BALTIMORE MD 21286-3006

Title D  
Name MCGUIRE, KENT  
Address 300 E. JOPPA ROAD  
SUITE 500  
City-State-Zip: BALTIMORE MD 21286-3006

Title DIRECTOR  
Name REED, PEGGY  
Address 300 E. JOPPA ROAD  
SUITE 500  
City-State-Zip: BALTIMORE MD 21286-3006

*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:** NINA M LINK

**DIRECTOR**

04/14/2021

Electronic Signature of Signing Officer/Director Detail

Date