

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000005202

Entity Name: THE BURN SOLUTION FOUNDATION, INC.**Current Principal Place of Business:**3632 LAND O' LAKES BLVD
SUITE 105-20
LAND O' LAKES, FL 34639**Current Mailing Address:**3632 LAND O' LAKES BLVD
SUITE 105-20
LAND O' LAKES, FL 34639 US**FEI Number:** 46-3819288**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KARNIEWICZ, JUDY ESQ
1211 W FLETCHER AVE
TAMPA, FL 33612 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	CHAIRMAN/DIRECTOR/PRESIDENT
Name	MILLER, WAYNE
Address	5127 LURGAN RD
City-State-Zip:	LAND O' LAKES FL 34638

Title	DIRECTOR
Name	MILLER, EVELYN
Address	5127 LUGAN RD.
City-State-Zip:	LAND O' LAKES FL 34638

Title	DIRECTOR
Name	MILLER, ALEXIS
Address	5127 LURGAN RD.
City-State-Zip:	LAND O' LAKES FL 34638

Title	DIRECTOR, VP
Name	CORDERO, DOUGLAS CHINCHILLA
Address	RESIDENTIAL ARIES #112
City-State-Zip:	HEREDIA COSTA RICA 40103

Title	DIRECTOR
Name	MELA, EVADNE
Address	969 PATTERSON DRIVE
City-State-Zip:	SARASOTA FL 34234

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: WAYNE MILLER**CHAIRMAN/DIRECTOR/PR** 01/24/2023
ESIDENT_____
Electronic Signature of Signing Officer/Director Detail_____
Date