

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # N01000009000

1. Entity Name
TOGETHER WITH PRIDE FOUNDATION, INC.



Principal Place of Business
**1288 LAKE BREEZE DR
WELLINGTON, FL 33414**

Mailing Address
**P.O. BOX 211566
ROYAL PALM BEACH, FL 33421 US**



01302008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0599914

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**HOUGH, JOHN H
340 ROYAL PALM WAY
SUITE 100
PALM BEACH, FL 33480**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000821518
02/19/08-80027-023 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRIDE, CURTIS JOHN 1288 LAKE BREEZE DR. WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRIDE, LISA HELENE 1288 LAKE BREEZE DR. WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRASSER, JOSEPH A 2050 COUNTRY TRACE LN., #21C TOLEDO, OH 43615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, on an attachment with an address, with all other like empowered.

1/31/08

561-801-1001