FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

ANNU	AL REPORT	s	andra B. Mortham ecretary of State N OF CORPORA					
	MENT # P94 0	00054423	(6)					
	TING FOUNDATIONS, I	NC.						
Principal Place	of Business	Mailing Address			·		HIRL BIBRI BIBI	J 11888 1141 1881
5076 SUNSET		5076 SUNSET C	T					
WINDERMER	E FL 34786-8404	WINDERMERE FI						
US		US			3. Date Incorporated or Qualified		te of Last R	
					07/21/1994 4. FET Number	 '	05/01/19	Applied For
2. Principal Pla	ace of Business	2a. Mailing Addres	s	59-3260450			Not Applicable	
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, e	tc		5. Certificate of Status Desired			Additional
22		27						Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
700	Country	28 Zip	Court	trv	This corporation has lability for			
Zip 24	25	29	30		Florida Statutes	[] N0		
<u> </u>	9. Name and Address of Cu				10. Name and Address of New F	legistered	Agent	
			[1	Name				
	Ben, erin k		1	32 Street Add	ress (P.O. Box Number is Not Acceptab	ile)		
	JNSET CT		-	B3		<u>-</u>		
WINDER	RMERE FL 34786		[
84						FI	 85 Zi	p Code
11. Pursuant to or registere familiar wit	to the provisions of Sections 607.0 ed agent, or both, in the State of th, and accept the obligations of,	0502 and 607.1508, Florida Florida. Such change was a Poction 607.0505, Florida St	Statutes, the above the coardinates.	e named corpo prporation's boa	ration submits this statement for the puind of directors. Thereby accept the app	mose of cl cintment a	hanging its i as registered	registered office Lagent, Lam
SIGNATURE	Signature, typed or printed name of registered	Well y	יז שעונ מאני	lgent signature require		. / 10	(.' :0	
12.		AND DIRECTORS	13.	3 - 13	ADDITIONS/CHANGES TO OFF			DRS IN 12
TITLE	PS	DELET	E 1.111	LF			☐ Change	Addition
NAME	BUETTGEN, ERIN K		1.2 NAI	N.E.				
STREET ADDRESS	5076 SUNSET CT			REET ADDRESS		3 '0	20-70	86-8404
CITY-SI-ZIP	WINDERMERE FL	רון מנוכז		Y - SI - ZIP		3:6	Change	Addition
TITLE	VPT BUETTGEN, JAMES J	☐ DELEI	E 2 1 %					-X
NAME STREET ADDRESS	5076 SUNSET CT			REET ADDRESS				
CITY-ST-ZIP	WINDERMERE FL			Y-S1-ZIP		Qi5	3478	6-8404
TITLE		DELE1	E 3 1 11	LE			☐ Change	☐ Addition
NAME			3 2 NA	MF				
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP		E pres		Y-S1-Z0F			Change	Addition
TITLE		☐ DELET	E 4 1 TI	i i			FT Outside	
NAME DEDUCE ADDRESS				MEET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				Y-ST-ZIP				
TIJLË		☐ DELE					Change	☐ Addition
NAME			5 2 NA	ME				
STREET ADDRESS			5.3.81	KEET ADDRESS				
CITY-ST-ZIP		F3 60.50		IY- S1- ZIF			Change	Addition
TITLE		☐ DELE					□ change	Aud (roll)
NAME			62 NA 12 E A	ME REET ADDRESS				
STREFT ADDRESS				IY-SI-ZP				
City - St - 7iP								

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attemment with an address.

SIGNATURE:

BUILD NITED NAME OF SIGNING OFFICER OR DIRECTOR

407-876-0760 Destine Priore #