

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 746601

**Entity Name:** OUR CORNER, INC.

**Current Principal Place of Business:**

3500 BARRANCAS AVE  
PENSACOLA, FL 32507

**Current Mailing Address:**

3500 BARRANCAS AVE  
PENSACOLA, FL 32507 US

**FEI Number:** 59-1863230

**Certificate of Status Desired:** No

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

BARE, CHARLES  
6021 OTTER POINT ROAD  
PENSACOLA, FL 32504 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:** CHARLES BARE

03/29/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title EXECUTIVE DIRECTOR  
Name BARE, CHARLES L  
Address 6021 OTTER POINT ROAD  
City-State-Zip: PENSACOLA FL 32504

Title PAST PRESIDENT, DIRECTOR  
Name OLLIFF, MICHELLE  
Address 4212 ROSEBUD COURT  
City-State-Zip: PENSACOLA FL 32504

Title DIRECTOR  
Name LAZEAR, LOREN  
Address 3019 LIANA LANE  
City-State-Zip: PENSACOLA FL 32505

Title PRESIDENT  
Name PRICE, DAVID  
Address 920 E JORDAN ST  
City-State-Zip: PENSACOLA FL 32503

Title DIRECTOR  
Name VELASQUEZ, RACHEL  
Address 4046 BOND CIRCLE  
City-State-Zip: NICEVILLE FL 32578

Title SECRETARY  
Name CRYSTAL, WILSON  
Address 715 W ZARRAGOSSA ST  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name THOMAS, LEEMON  
Address 910 BLUE SPRINGS DR  
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR  
Name DYE, SEPTEMBER  
Address 6425 PENSACOLA BLVD #3A  
City-State-Zip: PENSACOLA FL 32505

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*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:** CHARLES BARE

EXECUTIVE DIRECTOR

03/29/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           ALLEN, ALEXIS  
Address        4570 TRADEWINDS DRIVE  
City-State-Zip: PENSACOLA FL 32514

Title           LEGAL COUNSEL, DIRECTOR  
Name           DISALVO, BROOKE  
Address        3202 W NINE MILE RD  
                APT 5303  
City-State-Zip: PENSACOLA FL 32534

Title           DIRECTOR  
Name           BERCOVITCH, AARON  
Address        10833 BLACKTAIL LOOP  
City-State-Zip: PENSACOLA FL 32526

Title           VP  
Name           FERRARA, KEELY  
Address        206 FIRETHORN RD  
City-State-Zip: GULF BREEZE FL 32561

Title           DIRECTOR  
Name           WITT, AIDAN  
Address        607 E BELMONT ST  
City-State-Zip: PENSACOLA FL 32501

Title           DIRECTOR  
Name           TUDOR, SHELBY  
Address        1225 W GREGORY ST  
City-State-Zip: PENSACOLA FL 32502