

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761024

Entity Name: RONALD MCDONALD HOUSE CHARITIES OF NORTHWEST FLORIDA, INC.**FILED**
Jan 11, 2024
Secretary of State
2497842212CC**Current Principal Place of Business:**RONALD MCDONALD HOUSE
5200 BAYOU BLVD.
PENSACOLA, FL 32503**Current Mailing Address:**RONALD MCDONALD HOUSE
5200 BAYOU BLVD.
PENSACOLA, FL 32503**FEI Number: 59-2172279****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**JIMMERSON, SUMMER DENISE
RONALD MCDONALD HOUSE
5200 BAYOU BLVD.
PENSACOLA, FL 32503 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: SUMMER D JIMMERSON****01/11/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT
Name UEBERSCHAER, WEI
Address 2655 DEL MAR DRIVE
City-State-Zip: GULF BREEZE FL 32563Title VP, FINANCE
Name MASSEY, BILL
Address 900 N 12TH AVE
City-State-Zip: PENSACOLA FL 32501Title VP, HOUSE OPERATIONS
Name GAMPHER, STEVE
Address 5151 N 9TH AVE
City-State-Zip: PENSACOLA FL 32504Title PAST PRESIDENT
Name DELIMAN, DAVID
Address 3405 MCLEMORE DRIVE
City-State-Zip: PENSACOLA FL 32504Title PRESIDENT/CEO
Name JIMMERSON, SUMMER D
Address 5200 BAYOU BLVD
City-State-Zip: PENSACOLA FL 32503-2155

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: SUMMER JIMMERSON**PRESIDENT/CEO****01/11/2024**

Electronic Signature of Signing Officer/Director Detail

Date