

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765240

**Entity Name:** POLK COUNTY 4-H FOUNDATION, INC.

**FILED**  
**Apr 06, 2022**  
**Secretary of State**  
**6031719045CC**

**Current Principal Place of Business:**

POLK COUNTY 4-H FOUNDATION  
1702 HIGHWAY 17 SOUTH  
BARTOW, FL 33830

**Current Mailing Address:**

POLK COUNTY 4-H FOUNDATION  
P. O. BOX 9005, DWR HS03  
BARTOW, FL 33831-9005 US

**FEI Number: 59-2481764**

**Certificate of Status Desired: No**

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

WALKER, NICOLE A  
1702 HWY 17 SOUTH  
BARTOW, FL 33830 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	VP
Name	SLAUGHTER, JESSICA
Address	P.O. BOX 2576
City-State-Zip:	DAVENPORT FL 33836
Title	SECR
Name	BLACK, JENNY
Address	2014 COUNT CT
City-State-Zip:	LAKELAND FL 33813
Title	DIRECTOR
Name	JOYNER, G. MATHEW
Address	1285 EAST HIBISCUS DRIVE
City-State-Zip:	BARTOW FL 33830
Title	DIRECTOR
Name	MCKENZIE, CAROLE
Address	1040 FOX HUNT DRIVE
City-State-Zip:	WINTER HAVEN FL 33880

Title	PRESIDENT
Name	WITMER, CHRIS
Address	1195 E. GEORGIA STREET
City-State-Zip:	BARTOW FL 33830
Title	TREASURER
Name	FLETCHER, SYLVIA
Address	P.O. BOX 150
City-State-Zip:	HOMELAND FL 33847
Title	DIRECTOR
Name	SPINOSA, SARAH
Address	1515 S. HIBISCUS DRIVE
City-State-Zip:	BARTOW FL 33830
Title	DIRECTOR
Name	TURNER, HELEN
Address	1035 E MANN ROAD
City-State-Zip:	BARTOW FL 33830

**Continues on page 2**

*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: CHRIS WITMER**

**PRESIDENT**

**04/06/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           TARANGO, MARISOL  
Address        510 POOL BRANCH ROAD  
City-State-Zip: FT. MEADE FL 33841

Title           DIRECTOR  
Name           ATKINSON, MEGAN  
Address        3970 GERBER DAIRY ROAD  
City-State-Zip: WINTER HAVEN FL 33880