

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

DOCUMENT# N01000002393

**FILED**  
**Mar 08, 2022**  
**Secretary of State**  
**4622962945CC**

**Entity Name:** FREEDOM 7 FUNDRAISING COMMITTEE, INC.

**Current Principal Place of Business:**

400 4TH STREET S  
COCOA BEACH, FL 32931

**Current Mailing Address:**

400 4TH STREET S  
COCOA BEACH, FL 32931 US

**FEI Number:** 59-3699386

**Certificate of Status Desired:** No

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

LOTT, KATHRYN  
400 4TH STREET S  
COCOA BEACH, FL 32931 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:** KATHRYN LOTT

03/08/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BURCH, BRITNEY  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title            VP  
Name            MECKEL, ROBYN  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title            TREASURER  
Name            COBB, ERIN  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title            VP  
Name            SEGO, LINDSAY  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title            DIRECTOR  
Name            COGNETTI, ABBY  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title            SECRETARY  
Name            KAHLON, ERIN  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title            VP  
Name            RHING, JAIME  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title            DIRECTOR  
Name            VELARDE, ANNA  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

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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:** BRITNEY BURCH

**PRESIDENT**

03/08/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           BARNETT , CHRISTY  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931

Title           DIRECTOR  
Name           CHARARA, NICOLE  
Address        400 4TH STREET S  
City-State-Zip: COCOA BEACH FL 32931