

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000008324

**Entity Name:** THE OVERMYER FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

4963 BACOPA LANE S. UNIT 104  
SAINT PETERSBURG, FL 33715-2626

**Current Mailing Address:**

4963 BACOPA LANE S. UNIT 104  
SAINT PETERSBURG, FL 33715-2626 US

**FEI Number:** 20-0289993

**Certificate of Status Desired:** No

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

OVERMYER, JOHN E  
4963 BACOPA LANE S. UNIT 104  
SAINT PETERSBURG, FL 33715-2626 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 D  
Name OVERMYER, JOHN E  
Address 4963 BACOPA LANE S. UNIT 104  
City-State-Zip: SAINT PETERSBURG FL 33715-2626

Title D  
Name LAURIE, ANNE E  
Address 5305 S WAYNE ST  
City-State-Zip: FT WAYNE IN 46805

Title D  
Name OVERMYER, MICHAEL E  
Address 4963 BACOPA LANE S. UNIT 104  
City-State-Zip: SAINT PETERSBURG FL 33715-2626

*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:** JOHN E. OVERMYER

**PRESIDENT**

**01/23/2020**

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

\_\_\_\_\_  
Date