

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

DOCUMENT# N03000007460

**Entity Name:** PASSION FOR PRISON, INC.**Current Principal Place of Business:**3773 MOTT RD  
DOVER, FL 33527**Current Mailing Address:**P.O. BOX 273721  
TAMPA, FL 33688-3721**FEI Number:** 57-1184543**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE LAW OFFICES OF NICK SPRADLIN, PLLC  
4300 BISCAYNE BLVD  
SUITE 203  
MIAMI, FL 33137 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:** NICKOLAS J. SPRADLIN ESQ.**02/22/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                     |
|-----------------|---------------------|
| Title           | PTD                 |
| Name            | SANTIAGO, JESSICA   |
| Address         | P.O. BOX 273721     |
| City-State-Zip: | TAMPA FL 33688-3721 |

|                 |                     |
|-----------------|---------------------|
| Title           | D                   |
| Name            | SANTIAGO, SCOTT A   |
| Address         | P.O. BOX 273721     |
| City-State-Zip: | TAMPA FL 33688-3721 |

|                 |                     |
|-----------------|---------------------|
| Title           | DIRECTOR            |
| Name            | SMITH, STEPHEN      |
| Address         | P.O. BOX 273721     |
| City-State-Zip: | TAMPA FL 33688-3721 |

|                 |                     |
|-----------------|---------------------|
| Title           | DIRECTOR, SECRETARY |
| Name            | JOHNSON, CINDY      |
| Address         | P.O. BOX 273721     |
| City-State-Zip: | TAMPA FL 33688-3721 |

|                 |                     |
|-----------------|---------------------|
| Title           | DIRECTOR            |
| Name            | SATMARY, LAWRENCE   |
| Address         | P.O. BOX 273721     |
| City-State-Zip: | TAMPA FL 33688-3721 |

|                 |                  |
|-----------------|------------------|
| Title           | D, S             |
| Name            | STANFORD, DEBBIE |
| Address         | 3773 MOTT RD     |
| City-State-Zip: | DOVER FL 33527   |

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:** JESSICA SANTIAGO**PRESIDENT****02/22/2023**

Electronic Signature of Signing Officer/Director Detail

Date