

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010822

Entity Name: THE CAMOSSE FAMILY FOUNDATION, INC.**Current Principal Place of Business:**2 MEADOW LANE
CHARLTON, MA 01507**Current Mailing Address:**2 MEADOW LANE
CHARLTON, MA 01507**FEI Number: 55-0854420****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STRAUSS, JEROME M
1056 DIAMOND LAKE CIRCLE
NAPLES, FL 34114 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	JIROUT, JUDITH
Address	14578 RIVER BEACH DR. #310
City-State-Zip:	PORT CHARLOTTE FL 33953

Title	D
Name	SZYNAL, DONNA
Address	39701 BARBERRY CT
City-State-Zip:	TEMECULA CA 92591

Title	D
Name	CAMOSSE, CRAIG
Address	24 ROCK AVE.
City-State-Zip:	AUBURN MA 01501

Title	D
Name	CAMOSSE, HENRY JJR
Address	2 MEADOW LANE
City-State-Zip:	CHARLTON MA 01507

Title	D
Name	CAMOSSE, DAVID
Address	310 SOUTH ST.
City-State-Zip:	AUBURN MA 01501

Title	DIRECTOR
Name	CAMOSSE, CHARLES R
Address	301 BURNCOAT STREET
City-State-Zip:	WORCESTER MA 01603

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: HENRY J CAMOSSE JR**TRUSTEE****02/16/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date