

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000001450

**FILED**  
**Jan 16, 2017**  
**Secretary of State**  
**CC3406090460**

**Entity Name:** THE LINDA H. HAMSTEAD FOUNDATION, INC.

**Current Principal Place of Business:**

1717 N BAYSHORE DR PH B47  
MIAMI, FL 33132

**Current Mailing Address:**

1717 N BAYSHORE DR PH B47  
MIAMI, FL 33132

**FEI Number:** 20-2342239

**Certificate of Status Desired:** No

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

HAMSTEAD, LINDA H  
1717 N BAYSHORE DR PH B47  
MIAMI, FL 33132 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 HAMSTEAD, LINDA H  
Address 1717 N BAYSHORE DR PH B47  
City-State-Zip: MIAMI FL 33132

Title D  
Name SHUMAN, STEPHEN  
Address 608 SCHUBERT PL  
City-State-Zip: MORGANTOWN WV 26505

Title D  
Name SHUMAN, ROBERT L  
Address 256 HIGH STREET PO BOX 842  
City-State-Zip: MORGANTOWN WV 26507

*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:** LINDA H HAMSTEAD

**DIRECTOR**

**01/16/2017**

Electronic Signature of Signing Officer/Director Detail

Date