

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010257

Entity Name: EMBRACING OUR DIFFERENCES, INC.**Current Principal Place of Business:**1209 S. TAMIAMI TRAIL
SARASOTA, FL 34239**Current Mailing Address:**PO BOX 2559
SARASOTA, FL 34230**FEI Number:** 20-3581293**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WERTHEIMER, SARAH
2078 GOLDENROD STREET
SARASOTA, FL 34239 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:** SARAH WERTHEIMER

01/09/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name BERGMAN, RICHARD
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

Title DIRECTOR
Name WEBER, JOHN
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

Title CHAIR
Name WILLIAMS, CHARLES E
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

Title EXECUTIVE DIRECTOR / DIRECTOR
Name WERTHEIMER, SARAH
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

Title VICE-CHAIR
Name POTEAT-BROWN, LINDA
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

Title DIRECTOR
Name DE GUIA, CHRISTINA
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

Title TREASURER
Name YELLE, KAITLIN
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

Title DIRECTOR
Name NIEBUHR, CHLOE
Address PO BOX 2559
City-State-Zip: SARASOTA FL 34230

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: SARAH WERTHEIMER**EXECUTIVE DIRECTOR**

01/09/2024

Electronic Signature of Signing Officer/Director Detail

Date