

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013088

Entity Name: COSTELLO FAMILY FOUNDATION, INC.**Current Principal Place of Business:**8755 NW 31ST LANE
OCALA, FL 34482**Current Mailing Address:**PO BOX 4331
SUITE1750
LISLE, IL 60532 US**FEI Number:** 26-3258672**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 N CALHOUN ST #4
TALLAHASSEE, FL 32301 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	PRESIDENT
Name	COSTELLO, MICHAEL J II
Address	8755 NW 31ST LANE
City-State-Zip:	OCALA FL 34482

Title	STD
Name	COSTELLO, LISA M
Address	8755 NW 31ST LANE
City-State-Zip:	OCALA FL 34482

Title	DIRECTOR
Name	COSTELLO, ANTHONY
Address	8755 NW 31ST LANE
City-State-Zip:	OCALA FL 34482

Title	DIRECTOR
Name	COSTELLO, MICHAEL J.
Address	8755 NW 31ST LANE
City-State-Zip:	OCALA FL 34482

Title	VP
Name	COSTELLO, DOMINIC V.
Address	8755 NW 31ST LANE
City-State-Zip:	OCALA FL 34482

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: MICHAEL COSTELLO**PRESIDENT****04/28/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date