

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000005388

**Entity Name:** ROYAL PALM COAST REALTOR ASSOCIATION CRISIS  
FOUNDATION, INC.**Current Principal Place of Business:**2840 WINKLER AVE  
FT MYERS, FL 33916**Current Mailing Address:**2840 WINKLER AVE  
FT MYERS, FL 33916 US**FEI Number: 26-2532812****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HIMSCHOOT, JASON  
MAUGHAN HIMSCHOOT & ADAMS LAW GROUP  
15750 NEW HAMPSHIRE CT STE A  
FT MYERS, FL 33908 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: JASON HIMSCHOOT****03/03/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                     |
|-----------------|---------------------|
| Title           | VP                  |
| Name            | RAMAGE, JUDY        |
| Address         | 2840 WINKLER AVENUE |
| City-State-Zip: | FT MYERS FL 33916   |

|                 |                     |
|-----------------|---------------------|
| Title           | PRESIDENT           |
| Name            | WADE, ROBERT L      |
| Address         | 2840 WINKLER AVENUE |
| City-State-Zip: | FT MYERS FL 33916   |

|                 |                   |
|-----------------|-------------------|
| Title           | CEO               |
| Name            | JONES, BEATE      |
| Address         | 2840 WINKLER AVE  |
| City-State-Zip: | FT MYERS FL 33916 |

|                 |                   |
|-----------------|-------------------|
| Title           | SECRETARY         |
| Name            | SHAFFER, CYNTHIA  |
| Address         | 2840 WINKLER AVE  |
| City-State-Zip: | FT MYERS FL 33916 |

|                 |                     |
|-----------------|---------------------|
| Title           | TREASURER           |
| Name            | FRYE, MICHAEL       |
| Address         | 2840 WINKLER AVE    |
| City-State-Zip: | FORT MYERS FL 33916 |

*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: BEATE JONES****CEO****03/03/2022**

Electronic Signature of Signing Officer/Director Detail

Date