

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000282

Entity Name: SIMPKINS FAMILY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

400 HIGH POINT DR SUITE 500
COCOA, FL 32926

Current Mailing Address:

400 HIGH POINT DR SUITE 500
COCOA, FL 32926

FEI Number: 35-2355880

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SIMPKINS, B.W.
400 HIGH POINT DR SUITE 500
COCOA, FL 32926 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 SIMPKINS, B.W.
Address 110 S TWIN LAKES RD
City-State-Zip: COCOA FL 32926

Title D
Name SIMPKINS, LAVONN P
Address 110 S TWIN LAKES RD
City-State-Zip: COCOA FL 32926

Title D
Name SIMPKINS, JILL K
Address 844 RIVERSIDE DR
City-State-Zip: ORMOND BEACH FL 32176

Title D
Name HUNTER, BERNARD B
Address 724 E. CONCORD ST.
City-State-Zip: ORLANDO FL 32801

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: B. W. SIMPKINS

D

04/24/2014

Electronic Signature of Signing Officer/Director Detail

Date