

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000008563

**Entity Name:** WOAMTEC FOUNDATION, INC.**Current Principal Place of Business:**1200 DELK ROAD  
LONGWOOD, FL 32779**Current Mailing Address:**1200 DELK ROAD  
LONGWOOD, FL 32779 US**FEI Number:** 80-0499429**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VILLAGE TAX SERVICES LLC  
1540 INTERNATIONAL PARKWAY  
SUITE 2000  
LAKE MARY , FL 32746 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:** LOREN GILL

01/15/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                   |
|-----------------|-------------------|
| Title           | PRESIDENT         |
| Name            | HAWKINS, KATHLEEN |
| Address         | 1200 DELK ROAD    |
| City-State-Zip: | LONGWOOD FL 32779 |

|                 |                           |
|-----------------|---------------------------|
| Title           | DIRECTOR                  |
| Name            | WILLIAMS, KARYN           |
| Address         | 1005 BROOKSIDE WOODS BLVD |
| City-State-Zip: | HERMITAGE TN 37060        |

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | DI RE, DI-ANNE       |
| Address         | P.O. BOX 4931        |
| City-State-Zip: | WINTER PARK FL 32708 |

|                 |                            |
|-----------------|----------------------------|
| Title           | SECRETARY                  |
| Name            | CARR, GINA                 |
| Address         | 7550 HINSON STREET<br>#15C |
| City-State-Zip: | ORLANDO FL 32819           |

|                 |                            |
|-----------------|----------------------------|
| Title           | VP                         |
| Name            | PRICE, CINDY               |
| Address         | 940 CENTER CIRCLE # 3016   |
| City-State-Zip: | ALTAMONTE SPRINGS FL 32714 |

|                 |                                 |
|-----------------|---------------------------------|
| Title           | TREASURER                       |
| Name            | CARAWAY, MICHAEL                |
| Address         | 250 INTERNATIONAL PARKWAY # 208 |
| City-State-Zip: | LAKE MARY FL 32746              |

*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:** KATHLEEN HAWKINS

PRESIDENT

01/15/2015

Electronic Signature of Signing Officer/Director Detail

Date