# 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.

EXDR

# SIGNATURE: JOHNSIE BREVARD

Electronic Signature of Signing Officer/Director Detail

SIGNATURE:			
	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	EXDR	Title	B DI
Name	BREVARD, JOHNSIE R	Name	BLACK, JOHN A
Address	1511 MABLE BUTLER AVE	Address	1511 MABLE BUTLER AVE
City-State-Zip:	ORLANDO FL 32805	City-State-Zip:	ORLANDO FL 32805
Title	BP	Title	SEC
Name	JONES, SHARON F	Name	BLAKE, MARY MAGALENE
Address	1511 MABLE BUTLER AVE	Address	1511 MABLE BUTLER AVE
City-State-Zip:	ORLANDO FL 32805	City-State-Zip:	ORLANDO FL 32805

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.

## Name and Address of Current Registered Agent:

BREVARD J, OHNSIE R 1511 MABLE BUTLER AVE ORLANDO, FL 32805 US

VP

SUITE A

HOLT, CHRISTINA 2750 TAYLOR AV

ORLANDO FL 32855

Title

Name

Address

City-State-Zip:

## **Current Mailing Address:**

FEI Number: 01-0961360

# DOCUMENT# N1000003410

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: NEIGHBOR 2 NEIGHBOR FOUNDATION, INC.

## **Current Principal Place of Business:**

2750 TAYLOR AVE SUITE A ORLANDO, FL 32855

POST OFFICE BOX 551546 ORLANDO, FL 32855 US

# Certificate of Status Desired: No

04/30/2013

# FILED Apr 30, 2013 Secretary of State CC5638243986

Date

Date