

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009586

**Entity Name:** SHARE THE STOKE FOUNDATION, INC.

**Current Principal Place of Business:**

819 N. LAKESIDE DRIVE  
LAKE WORTH, FL 33460

**Current Mailing Address:**

PO BOX 1105  
LAKE WORTH, FL 33460 US

**FEI Number:** 27-3206852

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KINGSTON, KELLY  
819 N. LAKESIDE DRIVE  
LAKE WORTH, FL 33460 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 KINGSTON, KELLY  
Address 819 N. LAKESIDE DR.  
City-State-Zip: LAKE WORTH FL 33460

Title D  
Name BUFF, NEILY  
Address 819 N. LAKESIDE DR.  
City-State-Zip: LAKE WORTH FL 33460

Title D  
Name MARINER, TAYLER  
Address 819 N. LAKESIDE DR.  
City-State-Zip: LAKE WORTH FL 33460

Title DIRECTOR  
Name SMITH, KERRI  
Address P.O. BOX 1105  
City-State-Zip: LAKE WORTH FL 33460

*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:** KELLY KINGSTON

CEO

03/23/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date