

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

DOCUMENT# N10000010595

**Entity Name:** MISFIT RESQ INC

**Current Principal Place of Business:**

215 ALPINE ROAD  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

PO BOX 6232  
WEST PALM BEACH, FL 33405 US

**FEI Number:** 27-3955522

**Certificate of Status Desired:** No

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

VANNECK, SANDRA B  
4753 BELVEDERE ROAD  
WEST PALM BEACH, FL 33415 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 P  
Name VANNECK, SANDRA B  
Address 4753 BELVEDERE RD  
City-State-Zip: WEST PALM BEACH FL 33417

Title CV  
Name PORCHER, DALE DVM  
Address 3245 FOREST HILL BLVD  
City-State-Zip: WEST PALM BEACH FL 33406

Title AD  
Name SINDELAR, NADINE D  
Address 106 SHERWOOD CIR 2-A  
City-State-Zip: JUPITER FL 33458

Title AD  
Name DOUCETTE, HEATHER  
Address 8424 CLUB ESTATES WAY  
City-State-Zip: LAKE WORTH FL 33467

Title AD  
Name VANNECK, WILLIAM  
Address 217 WEST INDIES DR  
City-State-Zip: PALM BEACH FL 33480

*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:** VANNECK , SANDRA B

P

04/27/2022

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

\_\_\_\_\_  
Date