DOCUMENT# N10000011681

## Entity Name: THE ALLISON BRUNDICK HARAMIS FOUNDATION, INC.

**Current Principal Place of Business:** 

2905 CORINTHIAN AVE. SUITE 2 JACKSONVILLE, FL 32210

# **Current Mailing Address:**

2905 CORINTHIAN AVE. SUITE 2 JACKSONVILLE, FL 32210 US

# FEI Number: 27-4599048

## Name and Address of Current Registered Agent:

HARAMIS, DREW 2905 CORINTHIAN AVE. SUITE 2 JACKSONVILLE, FL 32210 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

### **Officer/Director Detail :**

Title	PD	Title	VP, PASTOR			
Name	HARAMIS, DREW	Name	HEMPHILL, ANN STEWART			
Address	2905 CORINTHIAN AVE. SUITE 2	Address	2905 CORINTHIAN AVE. SUITE 2			
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210			
Title	TRUSTEE	Title	TRUSTEE			
Name	IRVING, BARBARA	Name	WILLETTS, MARY LEE			
Address	2905 CORINTHIAN AVE. SUITE 2	Address	2905 CORINTHIAN AVE. SUITE 2			
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210			
Title	TRUSTEE	Title	EXECUTIVE DIRECTOR			
Title Name	TRUSTEE ONDINA, MIKE	Title Name	EXECUTIVE DIRECTOR NOTTINGHAM, LIZ			
Name	ONDINA, MIKE 2905 CORINTHIAN AVE.	Name	NOTTINGHAM, LIZ 2905 CORINTHIAN AVE. SUITE 2			
Name Address	ONDINA, MIKE 2905 CORINTHIAN AVE. SUITE 2	Name Address	NOTTINGHAM, LIZ 2905 CORINTHIAN AVE. SUITE 2			
Name Address City-State-Zip:	ONDINA, MIKE 2905 CORINTHIAN AVE. SUITE 2 JACKSONVILLE FL 32210	Name Address City-State-Zip:	NOTTINGHAM, LIZ 2905 CORINTHIAN AVE. SUITE 2 JACKSONVILLE FL 32210			
Name Address City-State-Zip: Title	ONDINA, MIKE 2905 CORINTHIAN AVE. SUITE 2 JACKSONVILLE FL 32210 TRUSTEE	Name Address City-State-Zip: Title	NOTTINGHAM, LIZ 2905 CORINTHIAN AVE. SUITE 2 JACKSONVILLE FL 32210 TRUSTEE			

## Continues on page 2

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	HARAMIS, DREW	PRESIDENT	01/26/2021
	Electronic Signature of Signing Officer/Director Detail		Date

FILED Jan 26, 2021 Secretary of State 2299903741CC

Certificate of Status Desired: Yes

Date

# **Officer/Director Detail Continued :**

Title	TRUSTEE	Title	TRUSTEE, TREASURER
Name	HARAMIS, LEE	Name	POWELL, SUSAN
Address	2905 CORINTHIAN AVE. SUITE 2	Address	2905 CORINTHIAN AVE. SUITE 2
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210
Title	TRUSTEE	Title	TRUSTEE, SECRETARY
Name	LEWIS, NICOLE	Name	PARKS, LIZ
Address	2905 CORINTHIAN AVE. SUITE 2	Address	2905 CORINTHIAN AVE. SUITE 2
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210
Title	TRUSTEE	Title	TRUSTEE
Name	WALKER, JR., CRAIG	Name	WHITE, SANDI
Address	2905 CORINTHIAN AVE. SUITE 2	Address	2905 CORINTHIAN AVE. SUITE 2
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210
Title	TRUSTEE	Title	TRUSTEE
Name	CHUNN, CHARLES	Name	POPE, CAROLINE
Address	2905 CORINTHIAN AVE. SUITE 2	Address	2905 CORINTHIAN AVE. SUITE 2
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210
Title	TRUSTEE		
Name	RACHELS, RAYMUR		
Address	2905 CORINTHIAN AVE. SUITE 2		

City-State-Zip: JACKSONVILLE FL 32210