## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10552

Entity Name: JESSIE TRICE COMMUNITY HEALTH FOUNDATION, INC.

FILED
Mar 03, 2024
Secretary of State
3197070760CC

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

5607 NW 27TH AVENUE SUITE #1 MIAMI, FL 33142

## **Current Mailing Address:**

5607 NW 27TH AVENUE SUITE #1 MIAMI, FL 33142

FEI Number: 59-2681559 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CLINCH, CLEMENTINE 2902 NW 185 TERR MIAMI GARDENS, FL 33056 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 C Title N

Name DUBOSE, SHERWOOD Name HAWKINS, RYAN

Address 5607 NW 27TH AVENUE Address 5607 NW 27TH AVENUE

SUITE #1 City-State-Zip: MIAMI FL 33142

City-State-Zip: MIAMI FL 33142

Title D

Name THOMAS, ROBERT
Name SANDERS, JANIS E

Address 5607 NW 27TH AVENUE SUITE #1

SUITE #1

City-State-Zip: MIAMI FL 33142

Title D

Name YATES, LENORA

Address 5607 NW 27TH AVENUE

SUITE #1

City-State-Zip: MIAMI FL 33142

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.