

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

DOCUMENT# N11000001746

**Entity Name:** RED HILLS WOUNDED WARRIOR GROUP INC.

**Current Principal Place of Business:**

1111 BROOKWOOD DR.  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

455 FACEVILLE LANDING ROAD  
BAINBRIDGE, GA 39819 US

**FEI Number:** 27-5214864

**Certificate of Status Desired:** No

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

PROCTOR, BRIAN C  
1111 BROOKWOOD DR.  
TALLAHASSEE, FL 32308 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-D                  | Title           | VP-D                       |
| Name            | PROCTOR, BRIAN C     | Name            | HATCHETT III, WALTER J     |
| Address         | 1111 BROOKWOOD DR.   | Address         | 455 FACEVILLE LANDING ROAD |
| City-State-Zip: | TALLAHASSEE FL 32308 | City-State-Zip: | BAINBRIDGE GA 39819        |

*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:** WALTER J HATCHETT III

VP-D

04/21/2022

Electronic Signature of Signing Officer/Director Detail

Date