

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000002129

Entity Name: COMMUNITY FOUNDATION FOR OCALA/MARION COUNTY, INC.**FILED**
Apr 22, 2024
Secretary of State
8704844443CC**Current Principal Place of Business:**324 SE 24TH STREET
OCALA, FL 34471**Current Mailing Address:**324 SE 24TH STREET
OCALA, FL 34471 US**FEI Number: 27-5098203****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BATSEL, JR., ROBERT
1531 SE 36TH AVENUE
OCALA, FL 34471 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: ROBERT BATSEL, JR.****04/22/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** CHAIRMAN
Name HENNESSEY, FRANK M
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**Title** DIRECTOR, OTHER
Name DEIORIO, LAUREN
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**Title** DIRECTOR, VC
Name CHAMBERS, WILLIAM E JR.
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**Title** DIRECTOR
Name SIBONI, MICHAEL C ESQ.
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**Title** DIRECTOR
Name WEBER, CHESTER
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**Title** DIRECTOR, TREASURER
Name KURTZ, JON
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**Title** DIRECTOR
Name BOYD, THAD
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**Title** DIRECTOR, SECRETARY
Name FONTAINE, JANE
Address 324 SE 24TH STREET
City-State-Zip: Ocala FL 34471**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: LAUREN DEIORIO**PRESIDENT/EXECUTIVE
DIRECTOR****04/22/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BRANSON, RUSTY
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name MIDGETT, DAVID
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name BATSEL, ROBERT JR.
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name KIRKPATRICK, KEN
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name CONE, III, DOUGLAS
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34480

Title DIRECTOR
Name SKULA, ERIKA
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name LEE, STEVEN
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name HILEBRANDT, JIM
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name CLIFTON-PETERS, ANGIE
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name LEWIS, ANGIE
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name O'MARA, THOMAS
Address 324 SE 24TH STREET
City-State-Zip: OCALA FL 34471