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.

TRUSTEE

## DOCUMENT# N11000003412

# Entity Name: MARIA L. RANSBURG CHARITABLE FOUNDATION, INC

**Current Principal Place of Business:** 

750 11TH STREET S 101 NAPLES, FL 34102

## **Current Mailing Address:**

750 11TH STREET S 101 NAPLES, FL 34102 US

#### FEI Number: 38-6870585

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

MILLER, JOEL S CPA 750 11TH STREET S 101 NAPLES, FL 34102 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	E: JOEL MILLER			01/27/2023	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	D	Title	DIRECTOR		
Name	FULOP, JACK	Name	EVANS, NATALIA		
Address	117 NORTH STREET	Address	3198 CARRIAGE CIRCLE		
City-State-Zip:	NAPLES FL 34108	City-State-Zip:	NAPLES FL 34105		
Title	TRUSTEE	Title	DIRECTOR		
Name	MILLER, JOEL S CPA	Name	EVANS, CARMEN RAE		
Address	750 11TH STREET S	Address	3198 CARRIAGE CIRCLE		
City-State-Zip:	101 NAPLES FL 34102	City-State-Zip:	NAPLES FL 34105		
Title	DIRECTOR				
Name	FULOP , JACK II				
Address	2236 SE 27TH TERRACE				
City-State-Zip:	CAPE CORAL FL 33904				

SIGNATURE: JOEL S MILLER

Electronic Signature of Signing Officer/Director Detail

# FILED Jan 27, 2023 Secretary of State 6152747257CC

Certificate of Status Desired: No

01/27/2023 Date