

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004060

Entity Name: JASMINE JAHANSHAH FIRE SAFETY FOUNDATION , INC.**Current Principal Place of Business:**235 ALHAMBRA PLACE
WEST PALM BEACH, FL 33405**Current Mailing Address:**235 ALHAMBRA PLACE
WEST PALM BEACH, FL 33405 US**FEI Number:** 36-4696846**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZWYSSIG, SUSANNA
235 ALHAMBRA PLACE
WEST PALM BEACH, FL 33405 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:** SUSANNA ZWYSSIG

03/09/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	T
Name	ZWYSSIG, SUSANNA
Address	235 ALHAMBRA PLACE
City-State-Zip:	WEST PALM BEACH FL 33405

Title	DP
Name	DJAHANSHAH, REZA
Address	1207 GENERAL POINTE TRACE
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DV
Name	JAHANSHAH, ARMON
Address	123 RIPLEY ST APT 2
City-State-Zip:	SAN FRANCISCO CA 94100

Title	DT
Name	FRIEDLAND, ZOE
Address	1319 HOOVER ST
City-State-Zip:	MENLO PARK CA 94025

Title	D
Name	SARAH, BLANC
Address	1519 NE 13TH ST
City-State-Zip:	GAINESVILLE FL 32601

Title	DIRECTOR
Name	CLEMENT, MEGAN
Address	105 EAST 22ND ST APT 5W
City-State-Zip:	NEW YORK NY 10035

Title	DIRECTOR
Name	HAYDEN, THOMAS
Address	3918 OYSTER HOUSE ROAD
City-State-Zip:	BOOMES ISLAND MD 20615

Title	DIRECTOR
Name	FLOTT, GRACE
Address	523 11TH AVE APT 302
City-State-Zip:	SEATTLE WA 98102

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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: SUSANNA ZWYSSIG**TREASURER**

03/09/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MOSLEMIAN, DAVOOD
Address	23165 BOCA CLUB COLONY CIRCLE
City-State-Zip:	BOCA RATON FL 33433