## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000005803

Entity Name: D.I.P. FOUNDATION INC

**Current Principal Place of Business:** 

7525 CENTURION PARKWAY SUITE 103

JACKSONVILLE, FL 32256

**Current Mailing Address:** 

7525 CENTURION PARKWAY

JACKSONVILLE, FL 32256

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MICKENS, KATINA 817 EDGEWOOD AVENUE WEST JACKSONVILLE, FL 32208 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

**FILED** Apr 30, 2013

**Secretary of State** 

CC3751254884

## Officer/Director Detail:

Title Р Title DIR

MICKENS, KATINA MICKENS, ROSCOE Name Name

7650 SENTRY OAK CIRCLE WEST Address Address 1549 WEST 25TH STREET City-State-Zip: JACKSONVILLE FL 32209 City-State-Zip: JACKSONVILLE FL 32256

Title **TRUSTEE** Title DIR

LEOW, TIMOTHY Name **CUMMINGS, FABIAN** Name

2402 NORTH MAIN STREET Address 149 PLANTATION BLVD Address City-State-Zip: JACKSONVILLE FL 32206 City-State-Zip: LAKE WORTH FL 33467

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: KATINA MICKENS

**PRESIDENT** 

04/30/2013