

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N12000010090

Entity Name: THE NORRIS COLE FOUNDATION INC.

Current Principal Place of Business:

20810 W. DIXIE HIGHWAY
MIAMI, FL 33180

Current Mailing Address:

893 S. MAIN STREET
#355
ENGLEWOOD, OH 45322 US

FEI Number: 46-1234116

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ARS & ASSOCIATES INC
20810 W. DIXIE HIGHWAY
MIAMI, FL 33180 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	VP
Name	COLE, NORRIS G. SR.
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322
Title	PRESIDENT
Name	COLE, NORRIS G. II
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322
Title	DIRECTOR
Name	HOLLINGSWORTH, JONATHAN
Address	6494 CENTERVILLE BUSINESS PARKWAY
City-State-Zip:	CENTERVILLE OH 45459
Title	DIRECTOR
Name	SPEARS, NATASHA R.
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322

Title	SECRETARY
Name	COLE, DEONNA L.
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322
Title	DIRECTOR
Name	COLE, DIANE L.
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322
Title	DIRECTOR
Name	JACKSON, RYAN C.
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322
Title	DIRECTOR
Name	CULOTTA, CARMEN
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322

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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: DIANE COLE

DIRECTOR

05/05/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SPARKS, EMERALD
Address	893 S. MAIN STREET #355
City-State-Zip:	ENGLEWOOD OH 45322