

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000011120

Entity Name: MICHELET & ELMIRE CHERENFANT FOUNDATION INC**Current Principal Place of Business:**2042 GALLAGHER AVENUE
DELTONA, FL 32725**Current Mailing Address:**2042 GALLAGHER AVENUE
DELTONA, FL 32725**FEI Number:** 46-1465239**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHERENFANT, MIREL E
2042 GALLAGHER AVE
DELTONA, FL 32725 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 PRESIDENT
Name CHERENFANT, MIREL E
Address 2343 LAKE WESTON DRIVE
 1525
City-State-Zip: ORLANDO FL 32810

Title VP
Name CHERENFANT, EMEC DR.
Address 2343 LAKE WESTON DRIVE
 1525
City-State-Zip: ORLANDO FL 32810

Title COO
Name CHERAZARD, SUPRIS
Address 15247 RIO PLAZA DR.
City-State-Zip: HUSTON TX 77083

Title CFO
Name PERRIER, MYRNA C
Address 2042 GALLAGHER AVENUE
City-State-Zip: DELTONA FL 32725

Title PR
Name PERRIER, GREGORY
Address 2042 GALLAGHER AVENUE
City-State-Zip: DELTONA FL 32725

Title VP
Name CANGE, URNIA C
Address 1040 ANGORA ST
City-State-Zip: DELTONA FL 32725

Title VP
Name CHERENFANT, MICHELET
Address 1040 ANGORA ST
City-State-Zip: DELTONA FL 32725

Title EXECUTIVE ADMINISTRATOR
Name CHERENFANT, DEBORAH
Address 2343 LAKE WESTON DRIVE
 1525
City-State-Zip: ORLANDO FL 32810

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: PERRIER MYRNA, C

CFO

06/18/2020

Electronic Signature of Signing Officer/Director Detail_____
Date