

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12812

**Entity Name:** AL AND NANCY BURNETT CHARITABLE FOUNDATION, INC.

**FILED**  
**Mar 06, 2022**  
**Secretary of State**  
**9896172912CC**

**Current Principal Place of Business:**

2465 SNOOK TRAIL  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

2465 SNOOK TRAIL  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 59-2620060

**Certificate of Status Desired:** No

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

MOORE, BECKY  
2465 SNOOK TR  
PALM BEACH GARDENS, FL 33410 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	PS	Title	D
Name	GRAVINA, AMY B	Name	BURNETT, BRUCE
Address	3793 CALEDONIA LANE	Address	2465 SNOOK TRAIL
City-State-Zip:	SARASOTA FL 34240	City-State-Zip:	PALM BEACH GARDENS FL 33410
Title	D	Title	TREASURER
Name	STEELE, MINDY	Name	MOORE, BECKY
Address	2465 SNOOK TRAIL	Address	2465 SNOOK TRAIL
City-State-Zip:	PALM BEACH GARDENS FL 33410	City-State-Zip:	PALM BEACH GARDENS FL 33410

*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:** BECKY MOORE

**TREASURER**

**03/06/2022**

Electronic Signature of Signing Officer/Director Detail

Date