

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000001824

**FILED  
May 01, 2015  
Secretary of State  
CC0310125130**

**Entity Name:** BLACK GIRAFFE FOUNDATION INC

**Current Principal Place of Business:**

804 ENGMAN ST  
CLEARWATER, FL 33755

**Current Mailing Address:**

804 ENGMAN ST  
CLEARWATER, FL 33755

**FEI Number: 47-3765013**

**Certificate of Status Desired: No**

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

RENFROE, TOBIAS  
804 ENGMAN ST  
CLEARWATER, FL 33755 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 P  
Name RENFROE, TOBIAS  
Address 804 ENGMAN ST  
City-State-Zip: CLEARWATER FL 33755

Title VP  
Name JOHNSON, NICOLE  
Address 804 ENGMAN ST  
City-State-Zip: CLEARWATER FL 33755

Title VP  
Name VOLITON, STACIE  
Address 804 ENGMAN ST  
City-State-Zip: CLEARWATER FL 33755

*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: TOBIAS RENFROE**

**P**

**05/01/2015**

Electronic Signature of Signing Officer/Director Detail

Date