

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000005513

**Entity Name:** SKOBEL CHARITABLE FOUNDATION INC**Current Principal Place of Business:**7475 SW 70TH LN  
GAINESVILLE, FL 32608**Current Mailing Address:**7475 SW 70TH LN  
GAINESVILLE, FL 32608 US**FEI Number:** 46-3129308**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKOBEL, MICHAEL ESQ.  
SKOBEL LAW PA  
6404 SW 77TH DR  
GAINESVILLE, FL 32608 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:** MICHAEL SKOBEL

03/31/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name SKOBEL, MICHAEL  
Address 7475 SW 70TH LN  
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR, TREASURER,  
SECRETARY  
Name SKOBEL, ALEX  
Address 7475 SW 70TH LN  
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR, VP  
Name SKOBEL, ADAM  
Address 7475 SW 70TH LN  
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR  
Name MADRIGAL, DIEGO  
Address 911 NORTH ORANGE AVE  
APT 403  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name BERGMAN, DANIEL  
Address 4455 WILLOW BEND DR  
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR  
Name APFELBAUM, NICOLAS  
Address 2631 SE ERICKSON DR  
City-State-Zip: PORT ST. LUCIE FL 34984

Title DIRECTOR  
Name BROWN, MICHAEL  
Address 202 EAST SOUTH STREET  
APT 1042  
City-State-Zip: ORLANDO FL 32801

*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:** MICHAEL SKOBEL

PRESIDENT

03/31/2018

Electronic Signature of Signing Officer/Director Detail

Date