

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

DOCUMENT# N14000002681

Entity Name: AMERICAN DISABILITIES FOUNDATION, INC.

Current Principal Place of Business:

1117 S.W. 13TH PLACE
BOCA RATON, FL 33486

Current Mailing Address:

1117 S.W. 13TH PLACE
BOCA RATON, FL 33486

FEI Number: 46-4699013

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAN VECHTEN, LOWELL
1117 S.W. 13TH PLACE
BOCA RATON, FL 33486 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: LOWELL VAN VECHTEN

04/28/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP	Title	VP
Name	HANSEN, MARK	Name	VAN VECHTEN, LOWELL
Address	6226 NW 84 TERR	Address	1117 S.W. 13TH PLACE
City-State-Zip:	PARKLAND FL 33067	City-State-Zip:	BOCA RATON FL 33486
Title	DIRECTOR	Title	DIRECTOR
Name	FULMER, INGRID	Name	WALSH, LORI
Address	2355 NW 41ST STREET	Address	824 ROYAL PALM WAY
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33486
Title	DIRECTOR	Title	DIRECTOR
Name	WILLIAMS, JANICE	Name	FOGEL, LEWIS
Address	6099 NW 31ST TERRACE APT. 408	Address	6291 VIA VENETIA N
City-State-Zip:	BOCA RATON FL 33496	City-State-Zip:	DELRAY BEACH FL 33484
Title	TREASURER	Title	DIRECTOR
Name	SCAFFIDI, ROXANA	Name	LE JEUNE, ELISSA
Address	316 SE 6TH AVENUE	Address	9613 LANCASTER PLACE
City-State-Zip:	DEERFIELD BEACH FL 33441	City-State-Zip:	BOCA RATON FL 33434

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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: CHRISTOPHER NOE

BOARD CHAIR

04/28/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name NOE, CHRISTOPHER
Address 6343 SKY SONG LANE
City-State-Zip: KNOXVILLE TN 37914

Title DIRECTOR
Name PETROCELLI, ELIZABETH
Address 17691 FOXGLOVE LANE
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name BOYLE, KELLY
Address PO BOX 99
City-State-Zip: BOCA RATON FL 33429