

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000005874

Entity Name: MOUNT DORA HEROES FOUNDATION, INC.**Current Principal Place of Business:**

% MOUNT DORA POLICE DEPT.
1300 N. DONNELLY ST.
MOUNT DORA, FL 32757

Current Mailing Address:

% MOUNT DORA POLICE DEPT.
1300 N. DONNELLY ST.
MOUNT DORA, FL 32757

FEI Number: 47-1163429**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**

BELL, ROBERT J
1300 N DONNELLY STREET
MOUNT DORA, FL 32757 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 CHAIRMAN
Name BELL, ROBERT
Address 1300 N DONNELLY STREET
City-State-Zip: MOUNT DORA FL 32757

Title VP
Name BROWN, DONNA H
Address % MOUNT DORA POLICE DEPT.
1300 N. DONNELLY ST.
City-State-Zip: MOUNT DORA FL 32757

Title EXECUTIVE SECRETARY,
TREASURER
Name REHN, ALIVIA
Address % MOUNT DORA POLICE DEPT.
1300 N. DONNELLY ST.
City-State-Zip: MOUNT DORA FL 32757

Title BOARD MEMBER
Name BAKER, LARRY
Address % MOUNT DORA POLICE DEPT.
1300 N. DONNELLY ST.
City-State-Zip: MOUNT DORA FL 32757

Title BOARD MEMBER
Name BOKLAND, LINDA
Address % MOUNT DORA POLICE DEPT.
1300 N. DONNELLY ST.
City-State-Zip: MOUNT DORA FL 32757

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: ALIVIA REHN**SECRETARY****04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date