2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000010756

Entity Name: PLAY IT FORWARD POLK, INC.

Current Principal Place of Business:

921 SUCCESS AVENUE LAKELAND, FL 33803

Current Mailing Address:

921 SUCCESS AVENUE LAKELAND, FL 33803 US

FEI Number: 47-2579201 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TOMLIN, RON 921 SUCCESS AVENUE LAKELAND, FL 33803 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: RONALD W. TOMLIN 03/17/2023

Electronic Signature of Registered Agent

Date

FILED Mar 17, 2023

Secretary of State

2971071074CC

Officer/Director Detail:

City-State-Zip:

LAKELAND FL 33813

Title DIRECTOR Title **PRESIDENT**

FRANKEL-BRICE, AMANDA Name Name TOMLIN, RONALD W 921 SUCCESS AVENUE Address 825 EAST ORANGE Address

City-State-Zip: LAKELAND FL 33801 City-State-Zip: LAKELAND FL 33803

Title DIRECTOR Title DIRECTOR Name MARTY JONES CORNISH, ROI Name Address P.O. BOX 2397 Address 2560 LAUREL GLENN DRIVE

City-State-Zip: LAKELAND FL 33806 City-State-Zip: LAKELAND FL 33803

Title DIRECTOR Title **DIRECTOR**

Name FLEMING, ROBIN Name MCCARTER, STEVE

Address **508 LAKE MARIAM TERRACE** Address #9 LATERRAZA

CASA LOMA City-State-Zip: WINTER HAVEN FL 33884

Name

Title DIRECTOR

DIRECTOR Title

BOOHER, BRENT Name MCCARTER, CONNIE Address 362 VAIL DRIVE

Address #9 LA TERRAZA City-State-Zip: WINTER HAVEN FL 33884

CASA LOMA

LAKELAND FL 33813 City-State-Zip: Continues on page 2

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.

03/17/2023 SIGNATURE: RON TOMLIN DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

NameOLDENKAMP, NATALIEAddress413 EAST POINSETTIACity-State-Zip:LAKELAND FL 33803