

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

DOCUMENT# N14000011377

**Entity Name:** ANQUAN BOLDIN FOUNDATION, INC.

**FILED**  
**Apr 26, 2022**  
**Secretary of State**  
**2615183959CC**

**Current Principal Place of Business:**

931 VILLAGE BLVD  
SUITE 905-104  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

931 VILLAGE BLVD  
SUITE 905-104  
WEST PALM BEACH, FL 33409 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

SIMON, MICHAEL W  
3839 NW BOCA RATON BLVD., SUITE 100  
BOCA RATON, FL 33431 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 DIRECTOR  
Name BOLDIN, ANQUAN  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

Title EXECUTIVE DIRECTOR  
Name BOLDIN, DIONNE  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

Title PROGRAMS DIRECTOR  
Name BOLDIN, CARL  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

Title SECRETARY  
Name ATTAWAY, TAMMY  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

Title D  
Name BANKS, HIKEEM  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

Title D  
Name SMITH, GRASFORD  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

Title D, FINANCE  
Name SULLIVAN, THAIS  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

Title TREASURER  
Name SWABY, LINDA  
Address 931 VILLAGE BLVD  
SUITE 905-104  
City-State-Zip: WEST PALM BEACH FL 33409

*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: DIONNE BOLDIN**

**EXECUTIVE DIRECTOR**

**04/26/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date