

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N15000003052

**Entity Name:** ROSALIE G. FUSCO CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

401 SOUTH LINCOLN AVENUE  
CLEARWATER, FL 33756

**Current Mailing Address:**

401 SOUTH LINCOLN AVENUE  
CLEARWATER, FL 33756

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LOVELACE, WILLIAM K  
401 SOUTH LINCOLN AVENUE  
CLEARWATER, FL 33756 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 P, S  
Name LOVELACE, WILLIAM K  
Address 401 SOUTH LINCOLN AVENUE  
City-State-Zip: CLEARWATER FL 33756

Title VP  
Name AMBROSINO, BRENDA M  
Address 401 SOUTH LINCOLN AVENUE  
City-State-Zip: CLEARWATER FL 33756

Title TR  
Name VONDERAU, DANIEL L  
Address 2025 RIPON DRIVE  
City-State-Zip: BELLEAIR BLUFFS FL 33764

*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: WILLIAM K. LOVELACE

PRESIDENT

09/07/2020

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

\_\_\_\_\_  
Date