

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000008260

**Entity Name:** AUSTINBLU FOUNDATION, INC.

**Current Principal Place of Business:**

638 U.S. 1  
160  
TEQUESTA, FL 33469

**Current Mailing Address:**

638 N US HIGHWAY 1  
SUITE 160  
TEQUESTA, FL 33469 US

**FEI Number:** 47-4960167

**Certificate of Status Desired:** No

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

OWEN, JACK B JR.  
4500 PGA BOULEVARD, SUITE 200  
PALM BEACH GARDENS, FL 33418 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/D  
Name BLU STEPHANOS, WILLIAM  
Address 638 NORTH US HIGHWAY 1  
160  
City-State-Zip: TEQUESTA FL 33469

Title T/D  
Name DEAN, RACHAEL  
Address 638 NORTH US HIGHWAY 1  
160  
City-State-Zip: TEQUESTA FL 33469

Title VP/D  
Name BLACK, CARLSON  
Address 638 NORTH US HIGHWAY 1  
160  
City-State-Zip: TEQUESTA FL 33469

Title S/D  
Name STEPHANOS, MARGAUX  
Address 638 NORTH US HIGHWAY 1  
160  
City-State-Zip: TEQUESTA FL 33469

*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:** CARLSON BLACK

VP

01/19/2024

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

\_\_\_\_\_  
Date