

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000005755

**FILED**  
**Feb 18, 2019**  
**Secretary of State**  
**2965238767CC**

**Entity Name:** TOM LUTZ FOUNDATION, INC.

**Current Principal Place of Business:**

56 OSPREY CIR  
PALM COAST, FL 32137-4527

**Current Mailing Address:**

56 OSPREY CIR  
PALM COAST, FL 32137-4527 US

**FEI Number:** 47-5466167

**Certificate of Status Desired:** No

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

LUTZ, THOMAS P  
56 OSPREY CIR  
PALM COAST, FL 32137-4527 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 D  
Name LUTZ, THOMAS P  
Address 56 OSPREY CIR  
City-State-Zip: PALM COAST FL 32137-4527

Title D  
Name GEPPNER, EDWARD A  
Address 58 OSPREY CIR  
City-State-Zip: PALM COAST FL 32137-4527

Title D  
Name KORBICH, CHRISTOPHER L  
Address 47 OSPREY CIR  
City-State-Zip: PALM COAST FL 32137-4527

*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:** THOMAS P. LUTZ

**DIRECTOR**

**02/18/2019**

Electronic Signature of Signing Officer/Director Detail

Date