

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000005803

Entity Name: PS27 FOUNDATION, INC.**Current Principal Place of Business:**10739 DEERWOOD PARK BLVD
SUITE 200A
JACKSONVILLE, FL 32256**Current Mailing Address:**10739 DEERWOOD PARK BLVD
SUITE 200A
JACKSONVILLE, FL 32256 US**FEI Number:** 81-2894661**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STALLINGS, JAMES
10739 DEERWOOD PARK BLVD
SUITE 200A
JACKSONVILLE, FL 32256 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:** JAMES STALLINGS

03/31/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name STALLINGS, JAMES
Address 10739 DEERWOOD PARK BLVD
SUITE 200A
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name JOHNSON, KAYE
Address 10739 DEERWOOD PARK BLVD
SUITE 200A
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name BURGESS, RONALD
Address 10739 DEERWOOD PARK BLVD
SUITE 200A
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name MEYER, WHITNEY
Address 10739 DEERWOOD PARK BLVD
SUITE 200A
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name WALKER, JORDAN
Address 10739 DEERWOOD PARK BLVD
SUITE 200A
City-State-Zip: JACKSONVILLE FL 32256

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: JAMES STALLINGS

CHAIRMAN

03/31/2022

Electronic Signature of Signing Officer/Director Detail

Date