

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000007146

Entity Name: HARRELL FAMILY CHARITIES, INC.**Current Principal Place of Business:**632 E. MAIN STREET
SUITE 201
LAKELAND, FL 33801**Current Mailing Address:**632 E. MAIN STREET
SUITE 201
LAKELAND, FL 33801 US**FEI Number:** 81-3385481**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ELLIS, SETH E ESQ
4755 TECHNOLOGY WAY STE 205
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 D
Name HARRELL, JACK JR
Address 632 E. MAIN STREET
SUITE 201
City-State-Zip: LAKELAND FL 33801Title D
Name HARRELL, TINA
Address 632 E. MAIN STREET
SUITE 201
City-State-Zip: LAKELAND FL 33801Title D
Name RUST, GARY
Address 632 E. MAIN STREET
SUITE 201
City-State-Zip: LAKELAND FL 33801Title DIRECTOR
Name HARRELL, WILLIAM
Address 632 E. MAIN STREET
SUITE 201
City-State-Zip: LAKELAND FL 33801Title DIRECTOR
Name HARRELL, III, JACK
Address 632 E. MAIN STREET
SUITE 201
City-State-Zip: LAKELAND FL 33801

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 H. HARRELL

D, SEC.

02/16/2021

Electronic Signature of Signing Officer/Director Detail_____
Date