2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2021
Secretary of State
9479943952CC

DOCUMENT# N16000008857

Entity Name: STROKE OUT CANCER INC

Current Principal Place of Business:

13118 WEXFORD HOLLOW RD N
JACKSONVILLE, FL 32224

Current Mailing Address:

13118 WEXFORD HOLLOW RD N
JACKSONVILLE, FL 32224

FEI Number: 81-3748048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUCHER, LISA
13118 WEXFORD HOLLOW RD N
JACKSONVILLE, FL 32224 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	PRESIDENT
Name	BUCHER, MICHAEL J
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE, FL 32224

Title	VP, SECRETARY
Name	BUCHER, LISA L
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224

Title	TREASURER
Name	BUCHER, STEFANI LYNN
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224

Title	LEAD TRUSTEE
Name	BUCHER, ASHLEY MARIE
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224

Title	TRUSTEE
Name	ROMAN, CARSON BAER
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224

Title	TRUSTEE
Name	GRIFFIN, JAMES BENNETT
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224

Title	TRUSTEE
Name	MORAN, CARSON WESLEY
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224

Title	TRUSTEE
Name	SHAFFER, CHRISTIAN DOUGLAS
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224

Continues on page 2

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: MICHAEL BUCHER PRESIDENT 02/10/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	OFFICER
Name	ANDERSON, ANALIESE LILLIE-CHRISTINE
Address	13118 WEXFORD HOLLOW RD N
City-State-Zip:	JACKSONVILLE FL 32224