

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000012067

**FILED**  
**Jan 17, 2020**  
**Secretary of State**  
**4164632109CC**

**Entity Name:** SHIRLEY I. & HARRIS E. "ZIP" LONG CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

150 BELLEVIEW BLVD.  
APT. #207  
BELLEAIR, FL 33756

**Current Mailing Address:**

150 BELLEVIEW BLVD.  
APT. #207  
BELLEAIR, FL 33756 US

**FEI Number: 81-4878048**

**Certificate of Status Desired: Yes**

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

LONG, SHIRLEY I  
150 BELLEVIEW BLVD.  
APT. #207  
BELLEAIR, FL 33756 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  
Name LONG, SHIRLEY I  
Address 150 BELLEVIEW BLVD., APT. #207  
City-State-Zip: BELLEAIR FL 33756

Title VP  
Name MACBAIN, JOHN A  
Address 1657 COACHMAKERS LANE  
City-State-Zip: CLEARWATER FL 33765

Title S/T  
Name LEGAULT, DAVID L  
Address 2938 WEST BAY DRIVE, SUITE A  
City-State-Zip: BELLEAIR BLUFFS FL 33770

Title DIRECTOR  
Name PAUL DUNHAM  
Address 13577 FEATHER SOUND DRIVE  
SUITE 400  
City-State-Zip: CLEARWATER FL 33762

*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: JOHN A MACBAIN**

**VICE PRESIDENT**

**01/17/2020**

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

\_\_\_\_\_  
Date