## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000002638

Entity Name: FAMILIES AFFECTED BY GUN VIOLENCE INC

**FILED** May 04, 2023 **Secretary of State** 6653567373CC

**Current Principal Place of Business:** 

17860 SW 111TH AVE MIAMI, FL 33157

**Current Mailing Address:** 

PO BOX 1107

MADISON, FL 32341 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRADY, JO ANN R. 17860 S.W. 111 AVE MIAMI, FL 33157 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: JO ANN R. BRADY 05/04/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

**TREASURER** 

Title

Title Title VΡ

BRADY, JO ANN R. Name LOVE, GWENDOLYN Name

17860 SW 111TH AVE 14700 BOOKER T. WASHINGTON Address Address

BLVD.

MIAMI FL 33157 City-State-Zip: **APT 514** 

City-State-Zip: MIAMI FL 33176

LOVETT, JOHNNY Name Title **SECRETARY** 

PO BOX 1107 Address Name ROBERTS, RUBY

City-State-Zip: MADISON FL 32341 Address 10759 SW 226TH STRETT

> GOULDS FL 33170 City-State-Zip:

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: JOANN R. BRADY PRESDIENT Date