

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000004986

Entity Name: VITAL FOUNDATION, INC.**Current Principal Place of Business:**1403 E. POWHATAN AVE.
TAMPA, FL 33604**Current Mailing Address:**1403 E. POWHATAN AVE.
TAMPA, FL 33604 US**FEI Number: 82-1107344****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DE LIZ JUAREZ, FLOR
1403 E. POWHATAN AVE.
TAMPA, FL 33604 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/D
Name	DE LIZ JUAREZ, FLOR
Address	1403 E. POWHATAN AVE.
City-State-Zip:	TAMPA FL 33604

Title	VP/D
Name	MARTINEZ, MINERVA
Address	2116 W. SPRUCE ST.
City-State-Zip:	TAMPA FL 33607

Title	S/D
Name	CLARK, CELEINY
Address	3359 HIDDEN HAVEN CT.
City-State-Zip:	TAMPA FL 33607

Title	T/D
Name	JOHLIC, MONICA
Address	6836 122ND WAY
City-State-Zip:	SEMINOLE FL 33772

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: FLOR DE LIZ JUAREZ**PRESIDENT****05/08/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date