| 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 |

0 above, or on an attachment with all other like empowered.

SIGNATURE: JOMO COUSINS

I

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

05/02/2022

Certificate of Status Desired: No

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

Officer/Director Detail :

| Title | Р | Title | VP |
|-----------------|----------------------|-----------------|--|
| Name | COUSINS, JOMO | Name | COUSINS, CHARMAINE |
| Address | 407 HAWK TALON DR | Address | 407 HAWK TALON DR |
| City-State-Zip: | LITHIA FL 33547 | City-State-Zip: | LITHIA FL 33547 |
| | | | |
| | | | |
| Title | D | Title | DIRECTOR |
| Title Name | D COUSINS, JOMO K | Title Name | DIRECTOR COUSINS, JAMYA C |
| | | | |
| Name | COUSINS, JOMO K | Name | COUSINS, JAMYA C 407 HAWK TALON DRIVE |

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N17000011730

Entity Name: JOMO AND CHARMAINE COUSINS FOUNDATION, INC

Current Principal Place of Business:

11705 BOYETTE RD STE 525 RIVERVIEW, FL 33569

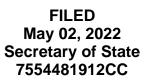
Current Mailing Address:

11705 BOYETTE RD STE 525 RIVERVIEW, FL 33569 US

FEI Number: 81-2917018

Name and Address of Current Registered Agent:

COUSINS, JOMO 407 HAWK TALON DR LITHIA, FL 33547 US



Date

Date