

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

DOCUMENT# N18000002883

**Entity Name:** LILO'S DISASTER RELIEF FUND INC.

**Current Principal Place of Business:**

1401 S OCEAN BLVD  
203  
BOCA RATON, FL 33432

**Current Mailing Address:**

1401 S. OCEAN BLVD.  
203  
BOCA RATON, FL 33432 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

HERNANDEZ, TAMMY  
1401 S OCEAN BLVD  
203  
BOCA RATON, FL 33432 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 D  
Name HERNANDEZ, TAMMY  
Address 2000 S. OCEAN BLVD. 10J  
City-State-Zip: BOCA RATON FL 33432

Title D  
Name GILLERAN, JAMES R  
Address 801 DUVAL ST  
City-State-Zip: KEY WEST FL 33040

Title D  
Name HALPIRN, BERT  
Address 1401 S OCEAN BLVD  
203  
City-State-Zip: BOCA RATON FL 33432

*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: TAMMY HERNANDEZ**

**MG**

**04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date