

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

DOCUMENT# N18000009887

**Entity Name:** CHRISMAN FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

650 SOUTH OWL DRIVE  
SARASOTA, FL 34236

**Current Mailing Address:**

650 SOUTH OWL DRIVE  
SARASOTA, FL 34236

**FEI Number: 83-2068931**

**Certificate of Status Desired: Yes**

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

NOLAN, MICHAEL J  
401 E. JACKSON STREET, SUITE 3100  
TAMPA, FL 33602 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 PD  
Name CHRISMAN, ALETA D  
Address 650 SOUTH OWL DRIVE  
City-State-Zip: SARASOTA FL 34236

Title VTD  
Name BOLTON, PAUL E  
Address 650 SOUTH OWL DRIVE  
City-State-Zip: SARASOTA FL 34236

Title SD  
Name CHRISMAN MEISSNER, REBECCA L  
Address 403 CENTRAL NASSAU ROAD  
City-State-Zip: EAST NASSAU NY 12062

Title ASD  
Name CHRISMAN SENEAL, ALEXA C  
Address 25 ROBINWOOD DR  
City-State-Zip: CLIFTON PARK NY 12065

*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: ALETA D CHRISMAN**

**PRESIDENT**

**05/01/2020**

Electronic Signature of Signing Officer/Director Detail

Date