

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

DOCUMENT# N18000009973

**Entity Name:** FIGGERS FOUNDATION INC.

**Current Principal Place of Business:**

14508 LINCOLN BLVD.  
SUITE 212  
MIAMI, FL , FL 33176

**FILED**  
**May 01, 2023**  
**Secretary of State**  
**6271610817CC**

**Current Mailing Address:**

300 SE 2ND STREET  
SUITE 600  
FORT LAUDERDALE, FL 33301 US

**FEI Number: 83-2013108**

**Certificate of Status Desired: No**

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

THE LAW OFFICE OF NATLIE G. FIGGERS, LLC  
300 SE 2ND STREET  
SUITE 600  
FORT LAUDERDALE, FL 33301 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: NATLIE FIGGERS**

**05/01/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FIGGERS, FREDDIE  
Address        14508 LINCOLN BLVD.  
                  SUITE 212  
City-State-Zip: MIAMI, FL FL 33176

Title            TREASURER  
Name            FIGGERS, NATLIE  
Address        14508 LINCOLN BLVD.  
                  SUITE 212  
City-State-Zip: MIAMI, FL FL 33176

Title            SECRETARY  
Name            FIGGERS, NATLIE  
Address        14508 LINCOLN BLVD.  
                  SUITE 212  
City-State-Zip: MIAMI, FL FL 33176

Title            BOARD MEMBER  
Name            STREETER, LINDSEY  
Address        14508 LINCOLN BLVD.  
                  SUITE 212  
City-State-Zip: MIAMI, FL FL 33176

Title            BOARD MEMBER  
Name            YOUNG, VICTOR  
Address        14508 LINCOLN BLVD.  
                  SUITE 212  
City-State-Zip: MIAMI, FL FL 33176

Title            BOARD MEMBER  
Name            ETTEDGUI, SIDNEY  
Address        14508 LINCOLN BLVD.  
                  SUITE 212  
City-State-Zip: MIAMI, FL FL 33176

Title            BOARD MEMBER  
Name            PRESHA, WALTER "MICKEY" SR.  
Address        14508 LINCOLN BLVD.  
                  SUITE 212  
City-State-Zip: MIAMI, FL FL 33176

*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: NATLIE G. FIGGERS**

**SECRETARY**

**05/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date