2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000012926

Entity Name: TEAM EXCELLENCE INTERNATIONAL INC

FILED Sep 13, 2021 Secretary of State 8836994466CC

Current Principal Place of Business:

2504 SPRINGFOREST ROAD TALLAHASSEE. FL 32301

Current Mailing Address:

53 BRIDAL GATE DR

CRAWFORDVILLE, FL 32327 US

FEI Number: 83-2784624 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLYNN-TOLLIVER, BARBARA 339 BRIER ROSE LANE ORNAGE PARK, FL 32065 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 TRES Title EBM

NameDUPOINT, DEREK C.NameKORNEGAY, DWAN V.Address2504 SPRINGFOREST ROADAddress3114 GALIMORE DRIVECity-State-Zip:TALLAHASSEE FL 32301City-State-Zip:TALLAHASSEE FL 32305

Title CEO Title EBM

Name TOLLIVER, DON W Name JOE, COL (RETIRED)RONALD M.

Address 53 BRIDAL GATE DR Address 5105 RED FOX RUN

City-State-Zip: CRAWFORDVILLE FL 32327 City-State-Zip: TALLAHASSEE FL 32303

Title EMB Title FS

Name HOLMES, PATRICK Name DAVIS, LISA

Address 290 WARER OAK DR Address 2506 RIDGEWAY ST

City-State-Zip: TALLAHASSEE FL 32303 City-State-Zip: TALLAHASSEE FL 32310

Title EMB Title VP

Name MORRIS, SHELIA Name WILLIAMS-PEASE, STEPHANIE

Address 560 PASCO STREET Address 312 PERKINS STREET

City-State-Zip: TALLAHASSEE FL 32305 City-State-Zip: TALLAHASSEE FL 32301

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: DEREK C DUPOINT TRESEURER 09/13/2021