## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000002682

Entity Name: KIM GOSE CANCER RESEARCH FOUNDATION, INC.

FILED Feb 21, 2021 Secretary of State 1733303934CC

## **Current Principal Place of Business:**

200 LAKE NELLIE DRIVE LAKE PLACID. FL 33852

## **Current Mailing Address:**

POST OFFICE BOX 405 SEBRING, FL 33871

FEI Number: 83-4165460 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LIVINGSTON, ROBERT E ESQ. 445 S. COMMERCE AVENUE SEBRING, FL 33870 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 Title TD

NameHITT, RICKNameSTEPHENSON, TRESAddress4510 LAKEVIEW DRIVEAddress5313 SURREY LANECity-State-Zip:SEBRING FL 33870City-State-Zip:SEBRING FL 33876

Title VPD Title SD

Name GOSE, MARK Name GOSE, MATT

Address 1551 LAKEVIEW DRIVE Address 6429 O'NEAL ROAD
City-State-Zip: SEBRING FL 33870 City-State-Zip: SEBRING FL 33876

Title D Title I

Name GOSE, JOHN Name GOSE, COURTNEY

Address 200 LAKE NELLIE DRIVE Address 1561 LAKEVIEW DRIVE # 957

City-State-Zip: LAKE PLACID FL 33852 City-State-Zip: SEBRING FL 33870

Title DIRECTOR
Name HITT, JAYMA

Address 4510 LAKEVIEW DRIVE City-State-Zip: SEBRING FL 33870

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: JOHN GOSE DIRECTOR 02/21/2021