

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000003631

Entity Name: FLORIDA TRUCKING ASSOCIATION FOUNDATION, INC.**Current Principal Place of Business:**350 E. COLLEGE AVENUE
TALLAHASSEE, FL 32301**Current Mailing Address:**350 E. COLLEGE AVENUE
TALLAHASSEE, FL 32301 US**FEI Number:** 84-2385899**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARMSTRONG, KENNETH S
350 E. COLLEGE AVENUE
TALLAHASSEE, FL 32301 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 INTERIM PRESIDENT
Name ARMSTRONG, KENNETH S
Address 350 E. COLLEGE AVENUE
City-State-Zip: TALLAHASSEE FL 32301

Title INTERIM SECRETARY TREASURER
Name BORGLUND, TERRY
Address 1470 HIGHWAY 17 S
City-State-Zip: BARTOW FL 33830

Title INTERIM CHAIR
Name HYDER, DOC
Address 41124 MESSICK ROAD
City-State-Zip: DADE CITY FL 33525

Title TRUSTEE
Name COBB, MIKE
Address 13410 SUTTON PARK DRIVE S
City-State-Zip: JACKSONVILLE FL 32224

Title TRUSTEE
Name DUSHARM, JARED
Address PO BOX 678
City-State-Zip: PALM CITY FL 34991

Title TRUSTEE
Name EDWARDS, MATT
Address 545 N. BROADWAY AVENUE
City-State-Zip: BARTOW FL 33830

Title TRUSTEE
Name FULTON, KATHY
Address 3010 SADDLE CREEK ROAD
City-State-Zip: LAKE LAND FL 33801

Title TRUSTEE
Name MCCARTHA, PAULA
Address 1130 KERWOOD CIRCLE
City-State-Zip: OVIEDO FL 32765

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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: KENNETH S ARMSTRONG

INTERIM PRESIDENT

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name PRITCHETT, PHILLIP
Address PO BOX 311
City-State-Zip: LAKE BUTLER FL 32054

Title TRUSTEE
Name SEVERIT, JAKE
Address PO BOX 32024
City-State-Zip: LAKELAND FL 33802

Title TRUSTEE
Name SIMS, HOPE
Address 445 W. AMELIA ST.
City-State-Zip: ORLANDO FL 32801

Title TRUSTEE
Name ROY, WILLIAM
Address 18815 NW 115TH AVENUE
City-State-Zip: ALACHUA FL 32615

Title TRUSTEE
Name WATKINS, CARY
Address 134 DEER LAKE CIRCLE
City-State-Zip: ORMOND BEACH FL 32174