

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000005736

Entity Name: LEMONZZZ 2 LEMONADE INC.**Current Principal Place of Business:**4415 DEAUVILLE WAY
PENSACOLA, FL 32505**Current Mailing Address:**4415 DEAUVILLE WAY
PENSACOLA, FL 32505 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARTIN, LUCINDA F
4415 DEAUVILLE WAY
PENSACOLA, FL 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 P
Name MARTIN, LUCINDA F
Address 4415 DEAUVILLE WAY
City-State-Zip: PENSACOLA FL 32505

Title TREA
Name KNIGHT, MARY
Address 400 N S ST
City-State-Zip: PENSACOLA FL 32505

Title CHAIRMAN
Name DUKES, ROSA
Address 1231 ALBUQUERQUE CIRCLE
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name BLACK, TARAN
Address 2307 NORTH 6TH AVENUE
City-State-Zip: PENSACOLA FL 32503

Title VP
Name MCCRAY, TONY
Address 1402 EAST LEONARD STREET
City-State-Zip: PENSACOLA FL 32503

Title CFO
Name BROADHURST, LORI
Address 3056 GULF BREEZE PARKWAY
City-State-Zip: GULF BREEZE FL 32563

Title CLERK
Name BURGESS, AMY
Address 4406 DEAUVILLE WAY
City-State-Zip: PENSACOLA FL 32505

Title SECRETARY
Name MARCHMAN, ARLINE
Address 8000 CORONET DRIVE
City-State-Zip: PENSACOLA FL 32514

Continues on page 2

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: MARTIN, LUCINDA F**PRESIDENT****05/01/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	TRUSTEE
Name	PEARSALL1, JULIA
Address	1520 EAST YONGE STREET
City-State-Zip:	PENSACOLA FL 32503