

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

DOCUMENT# N19000007058

**Entity Name:** FAPSC FOUNDATION, INC.

**Current Principal Place of Business:**

150 SOUTH MONROE STR., STE. 306  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

150 SOUTH MONROE STR., STE. 306  
TALLAHASSEE, FL 32301

**FEI Number:** 84-2419350

**Certificate of Status Desired:** No

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

MORTHAM, ALLEN  
150 SOUTH MONROE STR., STE. 306  
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 VP  
Name BRADLEY, NANCY  
Address 425 SOUTH NOVA ROAD  
City-State-Zip: ORMOND BEACH FL 32174

Title TREASURER  
Name ALVAREZ, DOMINGO  
Address 1981 NW 88 COURT  
SUITE 204  
City-State-Zip: DORAL FL 33172

Title SECRETARY  
Name EDWARDS, SUE  
Address 3101 W. DR. MARTIN LUTHER KING  
JR. BLVD  
City-State-Zip: TAMPA FL 33607

Title DIRECTOR  
Name KAPLAN, AUDREY  
Address 321 NORTH CLARK STREET  
SUITE 1301  
City-State-Zip: CHICAGO IL 60654

Title PRESIDENT  
Name WENINGER, DEBRA  
Address 4200 BARLETTA COURT  
City-State-Zip: WESLEY CHAPEL FL 33543

Title DIRECTOR  
Name STEINMARC, SEAN  
Address 339 HICKSVILLE ROAD  
SUITE 537  
City-State-Zip: BETHPAGE NY 11714

*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:** ALVAREZ, DOMINGO

**TREASURER**

**03/31/2023**

Electronic Signature of Signing Officer/Director Detail

Date