

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000010266

Entity Name: THE 77 FOUNDATION INC.**Current Principal Place of Business:**1601-1 N MAIN ST #3159
JACKSONVILLE, FL 32206**Current Mailing Address:**1601-1 N MAIN ST #3159
SMB 7408
JACKSONVILLE, FL 32206 US**FEI Number:** 84-3233772**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEGALCORP SOLUTIONS, LLC
3440 W HOLLYWOOD BLVD, SUITE 415
HOLLYWOOD, FL 33021 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	KELLY, JAMES M
Address	1601-1 N MAIN ST #3159
City-State-Zip:	JACKSONVILLE FL 32206

Title	TRE
Name	LEE, SHARON
Address	1601-1 N MAIN ST #3159
City-State-Zip:	JACKSONVILLE FL 32206

Title	SEC
Name	JACKSON, APRIL
Address	1601-1 N MAIN ST #3159
City-State-Zip:	JACKSONVILLE FL 32206

Title	DIR
Name	KELLY,, JAMES M JR
Address	1601-1 N MAIN ST #3159
City-State-Zip:	JACKSONVILLE FL 32206

Title	DIR
Name	NAVARRO, JAMES
Address	1601-1 N MAIN ST #3159
City-State-Zip:	JACKSONVILLE FL 32206

Title	DIR
Name	KELLY, JAMES M
Address	1601-1 N MAIN ST #3159
City-State-Zip:	JACKSONVILLE FL 32206

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: SHARON LEE**CFO****04/29/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date