

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

DOCUMENT# N20000008180

**Entity Name:** CENTER OF PHILANTHROPIC INC.

**Current Principal Place of Business:**

311 SOUTHRIDGE RD  
DELRAY BEACH, FL 33444

**Current Mailing Address:**

311 SOUTHRIDGE RD  
DELRAY BEACH, FL 33444

**FEI Number: 83-2335668**

**Certificate of Status Desired: Yes**

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

TOUSSAINT, MIKAELOU A  
311 SOUTHRIDGE RD  
DELRAY BEACH, FL 33444 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 TOUSSAINT, MIKAELOU A  
Address 311 SOUTHRIDGE RD  
City-State-Zip: DELRAY BEACH FL 33444

Title VP  
Name CHOUTE, JOSUE  
Address 7164 COLONY CLUB APT 309  
City-State-Zip: LAKEWORTH FL 33463

Title AV  
Name JEAN BAPTISTE, MARIE J  
Address 5095 WOODLAND DR  
City-State-Zip: DELRAY BEACH FL 33444

*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: MIKAELOU A TOUSSAINT**

P

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date