

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000011416

Entity Name: PENSACOLA POSITIVITY INC**Current Principal Place of Business:**2700 NORTH 16TH AVENUE
PENSACOLA, FL 32503**Current Mailing Address:**2700 NORTH 16TH AVENUE
PENSACOLA, FL 32503 US**FEI Number:** 85-2972197**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAKEPEACE, MARY M
2700 NORTH 16TH AVENUE
PENSACOLA, FL 32503 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	FOUNDING DIRECTOR
Name	MAKEPEACE, MARY M
Address	2700 NORTH 16TH AVENUE
City-State-Zip:	PENSACOLA FL 32503

Title	TRES
Name	BROWN, NANCY
Address	200 NORTHCLIFFE DRIVE
City-State-Zip:	GULF BREEZE FL 32561

Title	CTO
Name	THREADGILL, JORDAN
Address	7260 KEATING TER
City-State-Zip:	PENSACOLA FL 32504

Title	DIR
Name	PHILLIPS, VICTORIA
Address	7260 KEATING TER
City-State-Zip:	PENSACOLA FL 32504

Title	PRESIDENT
Name	KENNEDY, LAURA
Address	2355 W. MICHIGAN AVE.
City-State-Zip:	PENSACOLA FL 32505

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: MARY M MAKEPEACE

FOUNDING DIRECTOR

03/26/2021

Electronic Signature of Signing Officer/Director Detail_____
Date