

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

DOCUMENT# N20000013896

**Entity Name:** FOUNDATION FOR THE HOMELESS INC.

**Current Principal Place of Business:**

1315 DELAWARE AVENUE  
FORT PIERCE, FL 34950

**Current Mailing Address:**

PO BOX 881631  
PORT SAINT LUCIE, FL 34988 UN

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

DAPOLITO, MICHAEL  
1680 SW BAYSHORE BLVD.  
SUITE 100  
PORT ST. LUCIE, FL 34984 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,D	Title	D
Name	DAPOLITO, MIKE	Name	BRUSH, GEORGE
Address	1680 SW BAYSHORE BLVD	Address	1680 SW BAYSHORE BLVD
City-State-Zip:	PORT SAINT LUCIE NY 34984	City-State-Zip:	PORT ST. LUCIE FL 34984

*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:** MIKE DAPOLITO

**PRESIDENT**

**04/10/2023**

Electronic Signature of Signing Officer/Director Detail

Date