## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000005381

Entity Name: F.O.F FOUNDATION, INC.

**Current Principal Place of Business:** 

8710 N SHERMAN CIRCLE

APT. 408

MIRAMAR, FL 33025

**Current Mailing Address:** 

8710 N SHERMAN CIRCLE APT. 408

MIRAMAR, FL 33025

FEI Number: 87-2771163 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROWE, KIMBERLY M 8710 N SHERMAN CIRCLE APT. 408 MIRAMAR, FL 33025 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

**FILED** Apr 28, 2025

**Secretary of State** 

3485963178CC

Officer/Director Detail:

Title Title DIR.

ROWE, KIMBERLY M Name Name HUXTABLE, EVENLENA 8710 N SHERMAN CIRCLE Address 2100 NW 185TH TERRACE Address

MIRAMAR FL 33025 MIAMI FL 33056 City-State-Zip: City-State-Zip:

Title DIR. Title

Name F.O.F.INC HUXTABLE, IRIE Name

Address 8710 N SHERMAN CIRCLE Address 2100 NW 185TH TERRACE City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIAMI FL 33056

SEC Title

Name ROWE, KIMBERLY

Address 8710 N SHERMAN CIRCLE

City-State-Zip: MIRAMAR FL 33025

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: KIMBERLY ROWE Electronic Signature of Signing Officer/Director Detail **FOUNDER** 

04/28/2025