

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N21000006418

Entity Name: FLTA CHARITABLE ACTION FOUNDATION, INC.

Current Principal Place of Business:

249 EAST VIRGINIA STREET
TALLAHASSEE, FL 32301

Current Mailing Address:

P.O. BOX 66145
ST. PETERSBURG BEACH, FL 33736 US

FEI Number: 87-1079330

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MERRITT, JAMES S
677 MOSSY BRANCH CT
LONGWOOD, FL 32779 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	CEO	Title	PRESIDENT
Name	MERRITT, JAMES SCOTT	Name	SCALETТА, MELISSA
Address	677 MOSSY BRANCH CT	Address	6545 CORPORATE CENTRE BLVD.
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	ORLANDO FL 32832
Title	IMMEDIATE PAST PRESIDENT	Title	TREASURER
Name	HALL HARRISON, LINDSAY	Name	STEELE, TIMOTHY
Address	111 WOODSTREAM CT	Address	3029 JACKSON ST. N.
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	ST. PETERSBURG FL 33704
Title	TRUSTEE	Title	TRUSTEE
Name	STHRESHLEY, JOHN	Name	SEIDEL, SABINE
Address	2119 147TH CT. E.	Address	1258 PUNTA GORDA CIRCLE
City-State-Zip:	BRADENTON FL 37212	City-State-Zip:	WINTER SPRINGS FL 32708
Title	TRUSTEE	Title	TRUSTEE
Name	MANNEBACH, SHELLY	Name	PRESCOTT, LEONARD
Address	461 QUAIL HILL DRIVE	Address	817 OBISPO AVE.
City-State-Zip:	DEBARY FL 32713	City-State-Zip:	CORAL GABLES FL 33134

Continues on page 2

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: JAMES S MERRITT

EXECUTIVE DIRECTOR

07/22/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name MCCALL, ALAN
Address 10308 SW 32ND AVE.
City-State-Zip: GAINESVILLE FL 32608

Title TRUSTEE
Name STRAUS, SKIP
Address 10081 PINES BLVD.
STE. C
City-State-Zip: PEMBROKE PINES FL 33024

Title TRUSTEE
Name COLE, SHANNA
Address 2400 MAITLAND CENTER PARKWAY
STE. 200
City-State-Zip: MAITLAND FL 32751

Title TRUSTEE
Name HANCOCK, TAMMY
Address 500 N. WESTSHORE BLVD.
STE. 870
City-State-Zip: TAMPA FL 33609

Title TRUSTEE
Name STEIN, JEFFRY
Address 83 GENEVA DRIVE
SUITE 622708
City-State-Zip: OVIEDO FL 32765

Title TRUSTEE
Name HAVILAND, JOHN
Address P.O. BOX 1070
City-State-Zip: SEBRING FL 33871

Title TRUSTEE
Name WHITTAKER, DEBBIE
Address 6810 E HILLSBOROUGH AVE.
City-State-Zip: TAMPA FL 33610

Title TRUSTEE
Name CAMPBELL, VICKI
Address 3050 CONCHO DRIVE
City-State-Zip: PENSACOLA FL 32507