2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2024
Secretary of State
7168248781CC

DOCUMENT# N21000010490

Entity Name: COMPANION WITH THE POOR, USA, INC.

Current Principal Place of Business:

2217 UNIVERSITY SQUARE MALL
TAMPA, FL 33612

Current Mailing Address:

P.O. BOX 75157
TAMPA, FL 33675 US

FEI Number: 83-2238128

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AHLBERG, KRISTEN
2217 UNIVERSITY SQUARE MALL
TAMPA, FL 33612 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: KRISTEN AHLBERG 03/25/2024

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P, CM
Name	TUTTLE, BENJAMIN
Address	3456 E. TOWNSHIP ST.
City-State-Zip:	FAYETTVILLE AR 72703

Title	D
Name	ARMAS, LEONARD
Address	39A MADASALIN ST., SIKAOURA VILLAGE 1101
City-State-Zip:	QUEZON CITY

Title	DIRECTOR
Name	GASKINS, STACY
Address	5905 N. 48TH ST.
City-State-Zip:	TAMPA FL 33610

Title	D
Name	PROBST, LUKE
Address	3656 MOSSWOOD DR.
City-State-Zip:	LAFAYETTE CA 94549

Title	S
Name	ROLLET, PAUL
Address	101 SANDSTONE
City-State-Zip:	CHATHAM IL 62629

Title	D
Name	REYES, AMADO "DON"
Address	2747 C ZAMORA ST., CORNER GAIROS ST. BRGY. 97 1303
City-State-Zip:	PASAY CITY

Title	D
Name	ENCOMIO, FLORIPIN O
Address	6 STO. NINO ST. PAYATAS A 1119
City-State-Zip:	QUEZON CITY

Title	D
Name	MELICHOR, ED
Address	334A TWO SERENDRA MCKINLEY PARKWAY BONIFACIO GLOBAL CITY, TAGUIG CITY
City-State-Zip:	NCR, PHILIPPINES OC

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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: BENJAMIN TUTTLE CHAIR 03/25/2024

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	D
Name	DE MOL, JAMES
Address	117 WILDBERRY LANE
City-State-Zip:	GOOSE CREEK SC 29445