

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000000147

**Entity Name:** INNOVATION FOUNDATION CORP.

**Current Principal Place of Business:**

400 BEACH DRIVE NE  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

104 OLMSTEAD HILL ROAD  
WILTON, CT 06897 US

**FEI Number:** 88-1844021

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 4TH ST N  
STE 300  
ST. PETERSBURG,, FL 33702 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  
Name WOOD, CATHERINE D  
Address 400 BEACH DRIVE NE  
City-State-Zip: ST. PETERSBURG FL 33701

Title VP  
Name WOOD, CAITLIN  
Address 104 OLMSTEAD HILL ROAD  
City-State-Zip: WILTON CT 06897

Title D  
Name AMOS, CARRIE  
Address 24 BUTTERFIELD ROAD  
City-State-Zip: NEWTOWN CT 06470

Title D  
Name DODD, LISA  
Address 815 WATER STREET, B1005  
City-State-Zip: TAMPA FL 33602

Title D  
Name CARTER, KELLEN  
Address 815 WATER STREET  
City-State-Zip: TAMPA FL 33602

*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:** CAITLIN M WOOD

**DIRECTOR**

**04/19/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date