

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22000008071

Entity Name: COI LADDER INSTITUTE, INC.

Current Principal Place of Business:

3802 SPECTRUM BLVD.
STE. 151
TAMPA, FL 33612

Current Mailing Address:

3802 SPECTRUM BLVD.
STE. 151
TAMPA, FL 33612 UN

FEI Number: 42-1554718

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERRIEN, SALISA
3802 SPECTRUM BLVD.
STE. 151
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name BERRIEN, SALISA
Address 3802 SPECTRUM BLVD.
STE. 151
City-State-Zip: TAMPA FL 33612

Title SD
Name DUPREE, TANGELA D
Address 3802 SPECTRUM BLVD.
STE. 151
City-State-Zip: TAMPA FL 33612

Title D
Name LEWIS, KARL
Address 3802 SPECTRUM BLVD.
STE. 151
City-State-Zip: TAMPA FL 33612

Title TREASURER
Name HAMILTON, DARELEE
Address 3802 SPECTRUM BLVD.
STE. 151
City-State-Zip: TAMPA FL 33612

Title D
Name FAIRCLOTH, DONOVAN DALE
Address 3802 SPECTRUM BLVD.
STE. 151
City-State-Zip: TAMPA FL 33612

Title VC
Name GRONER, JOSH
Address 3802 SPECTRUM BLVD.
STE. 151
City-State-Zip: TAMPA FL 33612

Title D
Name PATTERSON , TARA
Address 3802 SPECTRUM BLVD.
STE. 151
City-State-Zip: TAMPA FL 33612

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: SALISA BERRIEN

PRESIDENT AND BOARD CHAIR 05/18/2025

Electronic Signature of Signing Officer/Director Detail

Date