# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N23000010367

## Entity Name: PAIN 4 PURPOSE INC.

## **Current Principal Place of Business:**

150 S CROW RD UNIT 803 PENSACOLA, FL 32506

## **Current Mailing Address:**

150 S CROW RD **UNIT 803** PENSACOLA, FL 32506 US

# FEI Number: 93-3142652

# Name and Address of Current Registered Agent:

GOODEN, INDIA M 5008 CHANDELLE DR PENSACOLA, FL 32507 US

Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Title	Р	Title	VP
Name	GOODEN, INDIA M	Name	GOODEN, JENNIFER D
Address	5008 CHANDELLE DR	Address	5008 CHANDELLE DR
City-State-Zip:	PENSACOLA FL 32507	City-State-Zip:	PENSACOLA FL 32507
Title	С		
Name	GOODEN, LEON R JR		
Address	5008 CHANDELLE DR		
City-State-Zip:	PENSACOLA FL 32507		

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: INDIA GOODEN

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Date

Electronic Signature of Signing Officer/Director Detail