

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N30568

**FILED**  
**Apr 17, 2024**  
**Secretary of State**  
**0781020957CC**

**Entity Name:** THE JESSE A. SPICOLA FOUNDATION, INC.

**Current Principal Place of Business:**

C/O CYNTHIA SPICOLA  
11708 CASEY RD  
TAMPA, FL 33618

**Current Mailing Address:**

C/O CYNTHIA SPICOLA  
11708 CASEY RD  
TAMPA, FL 33618 US

**FEI Number:** 59-2973257

**Certificate of Status Desired:** No

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

SPICOLA, CYNTHIA D.  
11708 CASEY ROAD  
TAMPA, FL 33618 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	D	Title	D
Name	SPICOLA, JOSEPH JR	Name	SPICOLA, CYNTHIA D
Address	11708 CASEY RD	Address	C/O CYNTHIA SPICOLA 11708 CASEY RD
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618
Title	D	Title	D
Name	FUENTES, LAWRENCE E	Name	SPICOLA, JOSEPH A
Address	1407 W. BUSCH BLVD.	Address	11708 CASEY RD
City-State-Zip:	TAMPA FL	City-State-Zip:	TAMPA FL 33618
Title	D		
Name	SPICOLA, JONATHAN		
Address	11708 CASEY RD		
City-State-Zip:	TAMPA FL 33618		

*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:** CYNTHIA D SPICOLA

**DIRECTOR**

**04/17/2024**

Electronic Signature of Signing Officer/Director Detail

Date