

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

DOCUMENT# N42233

**Entity Name:** THE FLORIDA ENDOWMENT FOUNDATION FOR VOCATIONAL REHABILITATION, INC.**FILED**  
**Feb 09, 2024**  
**Secretary of State**  
**9005910355CC****Current Principal Place of Business:**1709 HERMITAGE BOULEVARD  
SUITE 100  
TALLAHASSEE, FL 32308**Current Mailing Address:**1709 HERMITAGE BOULEVARD  
SUITE 100  
TALLAHASSEE, FL 32308 US**FEI Number: 59-3052307****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CHASE , ALLISON  
1709 HERMITAGE BOULEVARD  
SUITE 100  
TALLAHASSEE, FL 32308 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:** ALLISON CHASE

02/09/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT & CEO  
Name           CHASE, ALLISON  
Address        1709 HERMITAGE BOULEVARD  
                 SUITE 100 SUITE 200  
City-State-Zip: TALLAHASSEE FL 32308

Title            DIRECTOR  
Name           DOYLE, ALEXIS  
Address        5700 SADDLEBROOK WAY  
City-State-Zip: WESLEY CHAPEL FL 33543

Title            DIRECTOR  
Name           CHASE, ALLISON  
Address        1709 HERMITAGE BOULEVARD  
                 SUITE 100 ROOM 280P  
City-State-Zip: TALLAHASSEE FL 32308

Title            DIRECTOR  
Name           JENNINGS, TODD  
Address        201 N. FRANKLIN ST.  
City-State-Zip: TAMPA FL 33602

Title            SECRETARY  
Name           BYERS, JAMES "CHIP"  
Address        11567 REGENCY VILLAGE DR.  
City-State-Zip: ORLANDO FL 32821

Title            DIRECTOR  
Name           FAHEY, LORI  
Address        820 E. PARK AVE.  
                 BLDG. F-100  
City-State-Zip: TALLAHASSEE FL 32301

Title            TREASURER  
Name           HILLIARD, DOUG  
Address        550 E. ROLLINS ST.  
City-State-Zip: ORLANDO FL 32803

Title            VC  
Name           MIRZA-AGRAWAL, MAVARA DR.  
Address        3305 FAIRFIELD LN.  
City-State-Zip: WESTON FL 33331

**Continues on page 2**

*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:** ALLISON S. CHASE**PRESIDENT &CEO**

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   CHAIRMAN  
Name                 SALLARULO, LAURIE  
Address             JUNIOR ACHIEVEMENT OF SOUTH FLORIDA  
                      1130 COCONUT CREEK BLVD.  
City-State-Zip:   COCONUT CREEK  FL  33066

Title                   DIRECTOR  
Name                 WESTERMAN, STEPHANIE  
Address             1709 HERMITAGE BOULEVARD  
                      SUITE 100  
City-State-Zip:   TALLAHASSEE  FL  32308