

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000006054

**Entity Name:** LACEY FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

2327 SOUTHERN PINES PL  
DELAND, FL 32724

**Current Mailing Address:**

2327 SOUTHERN PINES PL  
DELAND, FL 32724 US

**FEI Number: 59-3352392**

**Certificate of Status Desired: No**

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

CORPORATION COMPANY OF ORLANDO  
300 SOUTH ORANGE AVENUE  
SUITE 1600 (JGH)  
ORLANDO, FL 32801 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  
Name KALEY, PEGGI LACEY  
Address 2327 SOUTHERN PINES PL  
City-State-Zip: DELAND FL 32724

Title P/D  
Name LACEY, PAULINE M  
Address 2327 SOUTHERN PINES PL  
City-State-Zip: DELAND FL 32724

Title S/T/D  
Name TABAR, PAULA L  
Address 909 LINCOLN  
City-State-Zip: DELAND FL 32724

*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: PAULA L. TABAR**

**DIRECTOR**

**04/26/2021**

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

\_\_\_\_\_  
Date