

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002046

Entity Name: R.E.A.C.H. FOR SPIRITUAL AWAKENING INC.**Current Principal Place of Business:**3041 SW 51ST AVE.
DAVIE, FL 33314**Current Mailing Address:**3041 SW 51ST AVE.
DAVIE, FL 33314 US**FEI Number:** 65-0910938**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LAW OFFICE OF CHRISTOPHER A NARDUCCI, P.A.
1975 E SUNRISE BLVD
SUITE 821
FT LAUDERDALE, FL 33304 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	PD
Name	LEVY, SCHOSHANA/SUSA REV
Address	3041 SW 51ST AVE
City-State-Zip:	DAVIE FL 33314

Title	VP
Name	LEVY, JOSEPH LEVY
Address	20 TRAIL OF THE MAPLES
City-State-Zip:	PUTNAM VALLEY NY 10579

Title	VPD
Name	GOMEZ, ROBERT
Address	820 TAPESTRY WAY APT 1102
City-State-Zip:	KNOXVILLE TN 37032

Title	T
Name	MANCINO, PAULA
Address	4908 SW 90TH TERR
City-State-Zip:	COOPER CITY FL 33328

Title	S
Name	COHEN, LYNNE
Address	7820 MARGATE BLVD
City-State-Zip:	MARGATE FL 33063

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: SCHOSHANA/SUSA REV LEVY

PD

03/28/2021

Electronic Signature of Signing Officer/Director Detail_____
Date