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

DOCUMENT# N96000005742

Entity Name: U. S. FAMILY FOUNDATION, INC.

**Current Principal Place of Business:** 

450 PLEASANT GROVE ROAD INVERNESS. FL 34452-5725

**Current Mailing Address:** 

450 PLEASANT GROVE ROAD INVERNESS, FL 34452-5725

FEI Number: 59-3412016 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LONGHOUSE, DONNA 202 SOUTH ROME AVENUE TAMPA, FL 33606 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:

Title

Electronic Signature of Registered Agent

Date

FILED Jan 11, 2021

**Secretary of State** 

0675798173CC

Officer/Director Detail:

TitleTREASURERTitlePRESIDENTNameWARDLOW, ROBERT CIIINameCASH, JOHNNY PAddress450 PLEASANT GROVE ROADAddress154 SE 7TH AVE.

City-State-Zip: INVERNESS FL 34452-5725 City-State-Zip: CRYSTAL RIVER FL 34429

Title D Title DIRECTOR

Name THURMAN, KAREN L Name MULLIGAN, GERARD

Address 9067 SOUTH WEST BLUE RUN DRIVE Address 203 NW BAY PATH DRIVE

City-State-Zip: CRYSTAL RIVER FL 34428

City-State-Zip: DUNNELLON FL 34432

DIRECTOR Title DIRECTOR

Name BOMAR, CARSON B MARTIN, ROBERT

Address 7165 E SAVANNAH COURT

Address City-State-Zip: FLORAL CITY FL 34436

City-State-Zip: LECANTO FL 34461

 Title
 DIRECTOR

 Name
 LAMB, JEWEL

 Name
 ROBINSON, WANN V

 Address
 PO BOX 487

Address 2305 HIGHWAY 44 WEST City-State-Zip: CRYSTAL RIVER FL 34423

City-State-Zip: INVERNESS FL 34452

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: JOHNNY CASH PRESIDENT 01/11/2021

Electronic Signature of Signing Officer/Director Detail

Date