

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000005064

**Entity Name:** FOR THE FAMILY, INC.**Current Principal Place of Business:**6909 N. ALBANY AVENUE  
TAMPA, FL 33604-5336**Current Mailing Address:**6909 N. ALBANY AVENUE  
TAMPA, FL 33604-5336**FEI Number:** 71-0903236**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COX, W. WARD  
6909 N. ALBANY AVENUE  
TAMPA, FL 33604-5336 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 PROCTOR, MARK  
Address 409 S. KINGS AVENUE  
City-State-Zip: BRANDON FL 33511Title D  
Name GREGORY, MATT  
Address 13128 N. DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33618Title D  
Name SINGER, GIL  
Address 5104 S. WEST SHORE BOULEVARD  
City-State-Zip: TAMPA FL 33611Title D.  
Name BINGHAM, LINDA  
Address 1414 EAST EMMA STREET  
City-State-Zip: TAMPA FL 33603Title ADMINISTRATOR  
Name COX, W. WARD  
Address 6909 N. ALBANY AVENUE  
City-State-Zip: TAMPA FL 33604

*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:** W. WARD COX**ADMINISTRATOR****06/18/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date