

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000000661

**Entity Name:** JORDAN KLAUSNER FOUNDATION, INC.

**Current Principal Place of Business:**

2514 NW 36TH LN  
GAINESVILLE, FL 32605

**Current Mailing Address:**

2514 NW 36TH LN  
GAINESVILLE, FL 32605 US

**FEI Number:** 59-3523678

**Certificate of Status Desired:** No

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

KLAUSNER, JAMES F  
2514 NW 36TH LN  
GAINESVILLE, FL 32605 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 CD  
Name KLAUSNER, JAMES F  
Address 2514 NW 36TH LN  
City-State-Zip: GAINESVILLE FL 32605

Title D  
Name PATTERSON, NIENTZU  
Address 2514 NW 36TH LN  
City-State-Zip: GAINESVILLE FL 32605

Title D  
Name FERGUSON, SILVIA  
Address 1904 NE 8TH STREET  
City-State-Zip: GAINESVILLE FL 32609

Title D  
Name STRZALKOWSKI, RAFAL  
Address 320 SE 3RD ST, APT. A5  
City-State-Zip: GAINESVILLE FL 32601

Title D  
Name FRANKLIN, RON  
Address 4165 NW 39TH WAY  
City-State-Zip: GAINESVILLE FL 32606

*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:** JAMES KLAUSNER

**DIRECTOR**

**01/09/2025**

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

\_\_\_\_\_  
Date