

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000001655

**Entity Name:** LITTLE SMILES, INC.**Current Principal Place of Business:**3569 91ST STREET NORTH  
SUITE 4  
PALM BEACH GARDENS, FL 33403**Current Mailing Address:**3569 91ST STREET NORTH  
SUITE 4  
PALM BEACH GARDENS, FL 33403 US**FEI Number:** 65-0963754**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DONOHUE, PAUL L JR  
2043 NORTH PALM CIRCLE  
NORTH PALM BEACH, FL 33408 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           | DIRECTOR                          |
| Name            | LUBECK, GEORGE III                |
| Address         | 3569 91ST STREET NORTH<br>SUITE 4 |
| City-State-Zip: | PALM BEACH GARDENS FL 33403       |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | DIRECTOR                          |
| Name            | SCHWAB, THOMAS                    |
| Address         | 3569 91ST STREET NORTH<br>SUITE 4 |
| City-State-Zip: | PALM BEACH GARDENS FL 33403       |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | DIRECTOR, FOUNDER                 |
| Name            | DONOHUE, PAUL L                   |
| Address         | 3569 91ST STREET NORTH<br>SUITE 4 |
| City-State-Zip: | PALM BEACH GARDENS FL 33403       |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | VP                                |
| Name            | SINICKI, VIRGINIA                 |
| Address         | 3569 91ST STREET NORTH<br>SUITE 4 |
| City-State-Zip: | PALM BEACH GARDENS FL 33403       |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | DIRECTOR                          |
| Name            | DONOVAN, MICHAEL                  |
| Address         | 3569 91ST STREET NORTH<br>SUITE 4 |
| City-State-Zip: | PALM BEACH GARDENS FL 33403       |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | DIRECTOR                          |
| Name            | SHEPHERD, SAMANTHA                |
| Address         | 3569 91ST STREET NORTH<br>SUITE 4 |
| City-State-Zip: | PALM BEACH GARDENS FL 33403       |

|                 |                                             |
|-----------------|---------------------------------------------|
| Title           | DIRECTOR                                    |
| Name            | KYLE, MARGI                                 |
| Address         | 16917 BIRKDALE COMMONS<br>PARKWAY<br>UNIT B |
| City-State-Zip: | HUNTERSVILLE NC 28078                       |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | TREASURER                         |
| Name            | MURPHY, BRIAN                     |
| Address         | 3569 91ST STREET NORTH<br>SUITE 4 |
| City-State-Zip: | PALM BEACH GARDENS FL 33403       |

**Continues on page 2**

*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:** PAUL DONOHUE

DIRECTOR, FOUNDER

03/23/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MARTYAK, JUDY  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title EXECUTIVE DIRECTOR  
Name MERCADO, NICOLE  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title DIRECTOR  
Name COLVIN, ROBIN  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title SECRETARY  
Name SKILLMAN, DONNA  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title DIRECTOR  
Name SOMMA, JERRY  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title DIRECTOR  
Name KELLEY, CRAIG  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title DIRECTOR, PRESIDENT ELECT  
Name NICKLER, PATRICK  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title DIRECTOR  
Name COLOMBINO, LORI  
Address 3569 91ST STREET NORTH  
SUITE 4  
City-State-Zip: PALM BEACH GARDENS FL 33403