2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000001387

Entity Name: POSITUDES, INC.

sainal Place of Pusiness

Current Principal Place of Business:

44 BOND ST

WESTBURY, NY 11590

Current Mailing Address:

44 BOND ST

WESTBURY, NY 11590

FEI Number: 11-3550195 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET

TALLAHASSEE, FL 32301-2525 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

FILED Mar 08, 2024

Secretary of State

0603536810CC

Officer/Director Detail:

 Title
 DIRECTOR
 Title
 PRESIDENT, DIRECTOR

 Name
 PUGLIESE, JOE
 Name
 FUSARO, VINCENT

Address 448 STONEMASON WAY Address 44 BOND ST

City-State-Zip: LANSDALE PA 19446 City-State-Zip: WESTBURY NY 11590

Title CHAIRMAN Title VP

Name PLENCNER, MARK A Name FUSARO, MARYANN

Address 26426 SOUTH HOWARD DR. Address 44 BOND ST

City-State-Zip: SUN LAKES AZ 85248 City-State-Zip: WESTBURY NY 11590

Title TREASURER Title VC

NameLEE, GLADYSNameBAILEY, JOSEPH W.AddressPO BOX 535Address1674 N. HUMBOLDT AVE.City-State-Zip:STONE MOUNTAIN GA 30086City-State-Zip:MILWAUKEE WI 53202

Title SECRETARY Title DIRECTOR

Name BLAKE, JEFF Name MYERS, JOHN
Address 20 VINE STREET #1227 Address 3333 BURNET AVE., MLC 5017

Address 20 VINE STREET, #1227 Address 3333 BURNET AVE., MLC 501

City-State-Zip: LANSDALE PA 19446 City-State-Zip: CINCINNATI OH 45229

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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: MARYANN FUSARO

Electronic Signature of Signing Officer/Director Detail

VICE PRESIDENT

03/08/2024

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name AMOND, JEFF Name BARTKO, ALISON

Address 1407 EMERALD COURT Address 44 BOND ST

City-State-Zip: WAUNAKEE WI 53597 City-State-Zip: WESTBURY NY 11590

Title DIRECTOR EMERITUS Title DIRECTOR

Name MADEIROS, CAROL Name TRAN, STEVEN

Address 147 LINCOLN AVE. Address 44 BOND ST

City-State-Zip: SARATOGA SPRINGS NY 12866 City-State-Zip: WESTBURY NY 11590