

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

DOCUMENT# F18000005478

**Entity Name:** ACCELERATE ACTION, INC.

**Current Principal Place of Business:**

294 WASHINGTON STREET, SUITE 500  
BOSTON, MA 02108

**Current Mailing Address:**

294 WASHINGTON STREET, SUITE 500  
BOSTON, MA 02108 US

**FEI Number: 82-3399959**

**Certificate of Status Desired: No**

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

ALARCON, LIZ  
1901 BRICKELL AVENUE, APT B-802  
MIAMI, FL 33129 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 DARNELL, JON  
Address 294 WASHINGTON STREET, SUITE 500  
City-State-Zip: BOSTON MA 02108

Title D  
Name GARBER, ADAM  
Address 294 WASHINGTON STREET, SUITE 500  
City-State-Zip: BOSTON MA 02108

Title PRESIDENT  
Name MURRAY, PETER  
Address 294 WASHINGTON STREET, SUITE 500  
City-State-Zip: BOSTON MA 02108

Title P  
Name POLETT, ZACHARY  
Address 294 WASHINGTON STREET, SUITE 500  
City-State-Zip: BOSTON MA 02108

Title ST, TREASURER  
Name RUSCH, EMILY  
Address 294 WASHINGTON STREET, SUITE 500  
City-State-Zip: BOSTON MA 02108

Title DIRECTOR  
Name KELLY-FISCHER, PATRICK  
Address 294 WASHINGTON STREET, SUITE 500  
City-State-Zip: BOSTON MA 02108

*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: PETER MURRAY**

**PRESIDENT**

**04/05/2022**

Electronic Signature of Signing Officer/Director Detail

Date