

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06257

Entity Name: THE MARTY LYONS FOUNDATION, INC.

Current Principal Place of Business:

105 SWEENEYDALE AVENUE
BAY SHORE, NY 11706

Current Mailing Address:

105 SWEENEYDALE AVENUE
BAY SHORE, NY 11706 US

FEI Number: 13-3146696

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LYONS, RICHARD
2013 RAVEN MANOR DRIVE
DOVER, FL 33527 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 CHAIRMAN
Name LYONS, MARTY
Address C/O 354 VETERANS MEMORIAL HWY,
STE 9
City-State-Zip: COMMACK NY 11725

Title PRESIDENT
Name POWERS, EDWARD
Address C/O 354 VETERANS MEMORIAL HWY,
STE 9
City-State-Zip: COMMACK NY 11725

Title TREASURER
Name DUPRE, EDWARD
Address C/O 354 VETERANS MEMORIAL HWY,
STE 9
City-State-Zip: COMMACK NY 11725

Title SECRETARY
Name DEFRANZA, JOHN
Address C/O 354 VETERANS MEMORIAL HWY,
STE 9
City-State-Zip: COMMACK NY 11725

Title ED
Name WHITE, SANDRA
Address C/O 354 VETERANS MEMORIAL HWY,
STE 9
City-State-Zip: COMMACK NY 11725

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: SANDRA WHITE

EXECUTIVE DIRECTOR

03/11/2021

Electronic Signature of Signing Officer/Director Detail

Date