

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718090

Entity Name: LA AMISTAD FOUNDATION, INC.

Current Principal Place of Business:

8400 LA AMISTAD COVE
FERN PARK, FL 32730

FILED
Jan 09, 2023
Secretary of State
8045214853CC

Current Mailing Address:

8400 LA AMISTAD COVE
FERN PARK, FL 32730 US

FEI Number: 59-1300982

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TALLEY, CARLTON
449 CARDINAL OAKS COURT
LAKE MARY, FL 32746 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: CARLTON TALLEY

01/09/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name WOODRUFF, BRUCE
Address 3101 MAGUIRE BLVD, STE. 256
City-State-Zip: ORLANDO FL 32803

Title CHAIRMAN
Name KELLER-ZIEROLD, LINDA
Address 10834 BOCA POINTE DR.
City-State-Zip: ORLANDO FL 32836

Title TRUSTEE
Name WILLIAMS, TERESA
Address 1450 CHESTNUT AVE
City-State-Zip: WINTER PARK FL 32789

Title CEO
Name TALLEY, CARLTON
Address 8400 LA AMISTAD COVE
City-State-Zip: FERN PARK FL 32730

Title TRUSTEE
Name AULD, BRYN
Address 409 LANGHOLM DRIVE
City-State-Zip: WINTER PARK FL 32789

Title TRUSTEE
Name HIGGINS, STEPHANIE
Address 1321 W HARVARD ST
City-State-Zip: ORLANDO FL 32804

Title TRUSTEE
Name MOORE, NOELLE
Address 608 WAVERLY LANE
City-State-Zip: MAITLAND FL 32751

Title TRUSTEE
Name SMITH, JORDAN
Address 204 HURST COURT
City-State-Zip: LAKE MARY FL 32746

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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: CARLTON TALLEY

CEO

01/09/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name MCLAREN, DEBBIE
Address 126 HIGHLAND AVENUE
City-State-Zip: NORWALK CT 06853