

**2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000001386

**FILED**  
**Apr 26, 2021**  
**Secretary of State**  
**4273882184CC**

**Entity Name:** LEGAL INSURRECTION FOUNDATION, INC.

**Current Principal Place of Business:**

18 MAPLE AVE, #280  
BARRINGTON, RI 02806

**Current Mailing Address:**

18 MAPLE AVE, #280  
BARRINGTON, RI 02806 US

**FEI Number: 82-2279600**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DP  
Name JACOBSON, WILLIAM A  
Address 18 MAPLE AVE, #280  
City-State-Zip: BARRINGTON RI 02806

Title DS  
Name SEGAL, ANNE  
Address 18 MAPLE AVE, #280  
City-State-Zip: BARRINGTON RI 02806

Title DT  
Name WALLICK, MARTHA  
Address 18 MAPLE AVE, #280  
City-State-Zip: BARRINGTON RI 02806

*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: WILLIAM A. JACOBSON**

**PRESIDENT**

**04/26/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date