

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003263

**Entity Name:** FACES MODELING TROUPE INC

**Current Principal Place of Business:**

2557 BANKS VIEW CIR  
APT 305  
APOPKA, FL 32703

**Current Mailing Address:**

PO BOX 161760  
ALTAMONTE SPRINGS, FL 32716 US

**FEI Number:** 26-0556895

**Certificate of Status Desired:** No

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

FACES MODELING TROUPE INC  
2557 BANKS VIEW CIR  
APT 305  
APOPKA, FL 32703 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:** TYLAN DAVIS

**02/07/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name WHITE, TERRY  
Address PO BOX 161760  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title EVP  
Name DAVIS , TYLAN  
Address PO BOX 161760  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title EVP  
Name JONES, CARHONDA  
Address PO BOX 161760  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title CFO  
Name COLTER , STEPHANIE  
Address PO BOX 161760  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

*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:** TYLAN DAVIS

**EVP**

**02/07/2024**

Electronic Signature of Signing Officer/Director Detail

Date