

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

DOCUMENT# N14000005929

**Entity Name:** THE K2 WIND FOUNDATION, INC.

**Current Principal Place of Business:**

3900 HOLLYWOOD BOULEVARD  
SUITE PH5  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

3900 HOLLYWOOD BOULEVARD  
SUITE PH5  
HOLLYWOOD, FL 33021 US

**FEI Number:** 47-1222099

**Certificate of Status Desired:** No

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

LEVITT, STEVEN  
3900 HOLLYWOOD BOULEVARD  
SUITE PH5  
HOLLYWOOD, FL 33021 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 CAFFYN, KEEGAN  
Address 3900 HOLLYWOOD BOULEVARD  
SUITE PH5  
City-State-Zip: HOLLYWOOD FL 33021

Title D  
Name AVERY, KELSEY  
Address 3900 HOLLYWOOD BOULEVARD  
SUITE PH5  
City-State-Zip: HOLLYWOOD FL 33021

Title D  
Name WALLINGTON, JOHN  
Address 3900 HOLLYWOOD BOULEVARD  
SUITE PH5  
City-State-Zip: HOLLYWOOD FL 33021

*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:** JOHN WALLINGTON

**DIRECTOR**

**02/07/2024**

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

\_\_\_\_\_  
Date