

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000005215

**Entity Name:** G.MO FOUNDATION INC

**Current Principal Place of Business:**

12441 NW 22ND CT.  
MIAMI, FL 33167

**Current Mailing Address:**

12441 NW 22ND CT.  
MIAMI, FL 33167 US

**FEI Number:** 86-3682630

**Certificate of Status Desired:** No

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

MOORE, REGINA  
12441 NW 22ND CT.  
MIAMI, FL 33167 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:** REGINA MOORE

03/13/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MOORE, REGINA  
Address 12441 NW 22ND CT.  
City-State-Zip: MIAMI FL 33167

Title VP  
Name MOORE-SHULER, KI'DRON  
Address 12441 NW 22ND CT  
City-State-Zip: MIAMI FL 33167

Title S  
Name BROWN, BRIDGETT  
Address 3700 NW 29TH STREET  
City-State-Zip: LAUDERDALE LAKES FL 33311

Title T  
Name ROBINSON, CHANTELL  
Address 5202 NW 48TH LANE  
City-State-Zip: TAMARAC FL 33319

Title ASST. TREASURER  
Name TEHRANI, DELERICE  
Address 152 CRAFT STREET  
City-State-Zip: PENSACOLA FL 32534

Title ASST. SECRETARY  
Name CARR, LATANDRA  
Address 1481 SW 8TH TERRACE  
City-State-Zip: DEERFIELD BEACH FL 33441

Title DIRECTOR  
Name STEPHENSON, DELPHA  
Address 2302 SW 180 AVENUE  
City-State-Zip: MIRAMAR FL 33029

*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:** REGINA MOORE

PRESIDENT

03/13/2023

Electronic Signature of Signing Officer/Director Detail

Date