CH Application Review

Florida Department of Agriculture and Consumer Services Division of Consumer Services



NO FEE REQUIRED

All documents and attachments submitted with this application are subject to public review pursuant to Chapter 119, F.S.

Application Information

License Number:	CH37019		
Document Tracking Nu	umber: 3956278	Application Date:	07/22/2024 10:20:01 PM
		Business Information	
Legal Name:	ATAYAL, INC.		
Business Phone:	407-459-7766		
Business Address:	631 DELANEY A ORLANDO Florid		
Mailing Address:	631 DELANEY A ORLANDO Florid		
Email Address:	info@atayal.org		
Website Address:	www.indigenousb	ridges.org	
Fictitious Names**	ATAYAL		

**All fictitious names must be registered with the Division of Corporations. If business is a corporation then 'Name' is the legal name of the business as listed with the Division of Corporations. You must list all names under which you intend to do business.

		Organization Information		
Form of Organization:	Corporation			
FEIN:	59-3719572			
Established In:	Florida	Legally Established:	3/26/2001	
		Business Details		
Month/Day fiscal year	ends:			12/31

Purpose of the Organization:

International indigenous cultural exchange activities.

Organization's Internal Revenue Service Status:

Purpose for which the contributions are used:

Funding international indigenous cultural exchange programs and activities. Administrative fees for the upkeep of having a web site.

Personnel Information

501(c)(3)

7/23/24, 10:20 AM

Name:	TONY COOLIDGE
Title:	Chief Executive Officer Director In Charge of Solicitation President
Phone:	407-459-7766
Address:	631 Delaney Ave., Apt 23 Orlando Florida 32801

Additional Information

- 1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] *No*
- 2. Is this person compensated? *No*
- **3.** Has this person, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? *No*
- 4. Has this person regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, misappropriation of property, or any crime enumerated in this chapter or resulting from acts committed while involved in the solicitation of contributions within the last 10 years? *No*
- 5. Has this person been enjoined from violating any law relating to a charitable solicitation? No

Name:	SHU-MIN H COOLIDGE
Title:	In Charge of Distribution Treasurer
Phone:	407-459-7766
Address:	631 Delaney Ave., Apt 23 Orlando Florida 32801

Additional Information

- 1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] *No*
- 2. Is this person compensated? *No*
- **3.** Has this person, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? *No*
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- 5. Has this person been enjoined from violating any law relating to a charitable solicitation? No

Name:	GARY SMOKE
Title:	Director
The.	Vice President
Phone:	407-459-7766
Address:	11018 SE 322nd St Auburn Washington 98092

Additional Information

- 1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] No
- 2. Is this person compensated? *No*
- **3.** Has this person, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? *No*
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- 5. Has this person been enjoined from violating any law relating to a charitable solicitation? *No*

Name:	CHRIS BOURFF
Title:	Authorized Agent
Phone:	407-459-7766
Address:	631 Delaney Ave., Apt 23 Orlando Florida 32801-3827

Additional Information

- 1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] *No*
- 2. Is this person compensated? *No*
- **3.** Has this person, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? *No*
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- 5. Has this person been enjoined from violating any law relating to a charitable solicitation? *No*

Name:	Wennifer Lin Haver
Title:	Secretary
Phone:	714-319-3666
Address:	20462 Clearwood Circle Huntington Beach California 92646

Additional Information

- 1. Is this person exempt from Public Records? [s. 119.071(4), F.S.] *No*
- 2. Is this person compensated? *No*
- **3.** Has this person, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? *No*
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CH Application Review

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5. Has this person been enjoined from violating any law relating to a charitable solicitation? *No*

Financial Statement

source: \$90 E2 and Schedule O Total Revenue: \$17,319 Total Expense: \$16,855 Program Service Expense: \$14,062 Management & General Expense: \$2,581 Fundraising Expense: \$212 Attached Documents 1. Name: 2023-Form-990-EZ.pdf Type: Financial Information Desc: 2023 Form 990-EZ Supporting Documents(List of Sources and Amounts) 1. Name: 2023-Form990-O.pdf Type: Miscellaneous Desc: 2023 990 Schedule O Application Questionnaire Did the charitable organization or sponsor receive \$50,000 or more in total revenue during the immediately preceding fiscal year? No Are the fundraising activities of the charitable organization or sponsor carried on by any compensated volunteers, members, or officers ? No Are any part of the assets or income of the organization or sponsor inured to the benefit of or paid to any officer or member? No Does the charitable organization or sponsor utilize a professional fundraising consultant, professional solicitor, or commercial co-venture? No First Name: Tony Last Name: Coolidge		Financial Statement	
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First Name: Tony Last Name: Coolidge			No
Last Name: Coolidge		Preparer Information	
Last Name: Coolidge	First Name:	Tony	
C C		•	
	Company Name:	c	

407-459-7766 info@atayal.org

President

Signature Information

I certify the following:

Phone Number:

Email Address:

Title:

* \square I certify that I am authorized to complete this application and the information provided is true and accurate.

- * I certify that the above-named charitable organization or sponsor received less than \$50,000 in total revenue (including contributions).
 - I certify that the fundraising activities of the above named charitable organization or sponsor are carried on by volunteers, members, or officers who are not compensated and no part of the assets or income of
- * a for by volunteers, members, or officers who are not compensated and no part of the assets of income of the organization or sponsor inures to the benefit of or is paid to any officer or member of the above named charitable organization or sponsor.
- * I certify that the above named charitable organization or sponsor does not utilize a professional fundraising consultant, professional solicitor, or commercial co-venturer.

Signature Name:/Tony Coolidge/Signature Date:7/22/2024