## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 702090** 

Entity Name: MCCREA FOUNDATION, INC.

FILED
Apr 30, 2017
Secretary of State
CC9800800072

## **Current Principal Place of Business:**

DAVID MCCREA C/O SHUTTS & BOWEN 200 SOUTH BISCAYNE BOULEVARD SUITE 4100 MIAMI, FL 33131

## **Current Mailing Address:**

DAVID MCCREA C/O SHUTTS & BOWEN 200 SOUTH BISCAYNE BOULEVARD SUITE 4100 MIAMI, FL 33131 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MCCREA, DAVID DAVID MCCREA C/O SHUTTS & BOWEN 200 SOUTH BISCAYNE BOULEVARD SUITE 4100 MIAMI, FL 33131 US

MIAMI FL 33131

297 BOUNDARY BAY ROAD

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:

City-State-Zip:

Address

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title SD

Name MCCREA, DAVID Name MCCREA, JANET

Address DAVID MCCREA C/O SHUTTS & Address DAVID MCCREA C/O SHUTTS &

BOWEN BOWEN

200 SOUTH BISCAYNE BOULEVARD 200 SOUTH BISCAYNE BOULEVARD

City-State-Zip:

Address

MIAMI FL 33131

6310 SOUTH TAY STREET

SUITE 4100 SUITE 4100

Title D Title D

Name STRUB, ASHLEY Name MCCREA, JESSICA

City-State-Zip: POINT ROBERTS WA 98281 City-State-Zip: SPOKANE WA 99224

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.