

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707398

Entity Name: FAIRCHILD TROPICAL BOTANIC GARDEN, INC.**Current Principal Place of Business:**10901 OLD CUTLER ROAD
CORAL GABLES, FL 33156**Current Mailing Address:**10901 OLD CUTLER ROAD
CORAL GABLES, FL 33156 US**FEI Number:** 59-0668480**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**YESPICA, JOSEFINA
10901 OLD CUTLER RD
CORAL GABLES, FL 33156 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 PD
Name GREER, BRUCE W
Address 5900 S.W. 97TH STREET
City-State-Zip: PINECREST FL 33156Title VPTD
Name RISI, LOUIS JJR.
Address 10915 LAKESIDE DRIVE
City-State-Zip: CORAL GABLES FL 33156Title VPD
Name SACHER, CHARLES P
Address 2655 LEJEUNE ROAD SUITE 1101
City-State-Zip: CORAL GABLES FL 33134Title SD
Name BURNS, JOYCE
Address 15245 SW 73 CT
City-State-Zip: MIAMI FL 33157Title CFO
Name YESPICA, JOSEFINA
Address 10901 OLD CUTLER RD
City-State-Zip: CORAL GABLES FL 33156

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: JOSEFINA YESPICA

CFO

03/17/2015

Electronic Signature of Signing Officer/Director Detail

Date