# 2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 707398** 

Entity Name: FAIRCHILD TROPICAL BOTANIC GARDEN, INC.

FILED
Jun 08, 2018
Secretary of State
CC5271905764

### **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: No

## Name and Address of Current Registered Agent:

CARL, LEWIS E 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: CARL E LEWIS 06/08/2018

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title PD Title VPTD

Name GREER, BRUCE W Name RISI, LOUIS J JR.

Address 5900 S.W. 97TH STREET Address 10915 LAKESIDE DRIVE

City-State-Zip: PINECREST FL 33156 City-State-Zip: CORAL GABLES FL 33156

Title VPD Title SD

NameSACHER, CHARLES PNameBURNS, JOYCEAddress2655 LEJEUNE ROAD SUITE 1101Address15245 SW 73 CTCity-State-Zip:CORAL GABLES FL 33134City-State-Zip:MIAMI FL 33157

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: BRUCE W GREER