2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710934

Entity Name: COCONUT GROVE CARES, INC.

Current Principal Place of Business:

3870 WASHINGTON AVENUE

MIAMI. FL 33133

Current Mailing Address:

3870 WASHINGTON AVENUE MIAMI. FL 33133

FEI Number: 59-1263934 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JORDAN, SYLVIA 3870 WASHINGTON AVENUE MIAMI, FL 33133 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: SYLVIA JORDAN 06/29/2020

Electronic Signature of Registered Agent

Date

FILED Jun 29, 2020

Secretary of State

8463231283CC

Officer/Director Detail:

Title Title D. SECRETARY GROB, DIANE PHD BRAND, NATHAN S Name Name

3870 WASHINGTON AVENUE Address 3870 WASHINGTON AVENUE Address

City-State-Zip: MIAMI FL 33133 MIAMI FL 33133 City-State-Zip:

Title D. TREASURER Title D Name ARGIZ, ANTHONY

LOPEZ, ANNETTE ESQ. Name

Address 3870 WASHINGTON AVE. Address 3870 WASHINGTON AVENUE

MIAMI FL 33133 City-State-Zip: City-State-Zip: MIAMI FL 33133

Title Title D

Name PENNEKAMP, CATHERINE BALLANCE, GEORGETTE Name Address 3870 WASHINGTON AVENUE 3870 WASHINGTON AVENUE Address

City-State-Zip: MIAMI FL 33133 MIAMI FL 33133 City-State-Zip:

Title Title D. PRESIDENT

TAPLIN, JASON Name ROSENBERG, DIANE Name

3870 WASHINGTON AVENUE Address 3870 WASHINGTON AVENUE Address

City-State-Zip: MIAMI FL 33133 MIAMI FL 33133 City-State-Zip:

Continues on page 2

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.

06/29/2020 SIGNATURE: SYLVIA R JORDAN EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title CEO

Name SYLVIA, JORDAN R

Address 3870 WASHINGTON AVENUE

City-State-Zip: MIAMI FL 33133

Title DIRECTOR

Name BELLONI-BARRETO, ILARIA

Address 3870 WASHINGTON AVENUE

City-State-Zip: MIAMI FL 33133

Title DIRECTOR

Name AMRON, LAUREN

Address 3870 WASHINGTON AVENUE

City-State-Zip: MIAMI FL 33133

Title CFO

Name HALPERN, DAVID

Address 3870 WASHINGTON AVENUE

City-State-Zip: MIAMI FL 33133

Title DIRECTOR

Name CHRISTA, GURKA

Address 3870 WASHINGTON AVENUE

City-State-Zip: MIAMI FL 33133