

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710934

FILED
Apr 29, 2023
Secretary of State
2486974273CC

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

04/29/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name GROB, DIANE PHD
Address 3870 WASHINGTON AVENUE
City-State-Zip: MIAMI FL 33133

Title D, SECRETARY
Name BRAND, NATHAN S
Address 3870 WASHINGTON AVENUE
City-State-Zip: MIAMI FL 33133

Title D, TREASURER
Name ARGIZ, ANTHONY
Address 3870 WASHINGTON AVE.
City-State-Zip: MIAMI FL 33133

Title D
Name BALLANCE, GEORGETTE
Address 3870 WASHINGTON AVENUE
City-State-Zip: MIAMI FL 33133

Title D, PRESIDENT
Name PENNEKAMP, CATHERINE
Address 3870 WASHINGTON AVENUE
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name ROSENBERG, DIANE
Address 3870 WASHINGTON AVENUE
City-State-Zip: MIAMI FL 33133

Title CEO
Name SYLVIA, JORDAN R
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

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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: SYLVIA R. JORDAN

EXECUTIVE DIRECTOR

04/29/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
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 DIRECTOR
Name TUELLMANN, JULIA
Address 3870 WASHINGTON AVENUE
City-State-Zip: MIAMI FL 33133