2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 733602

Entity Name: THE VILLAGE FOUNDATION, INC.

Current Principal Place of Business:

169 E FLAGLER STREET SUITE 1300 MIAMI, FL 33131 FILED
Jan 18, 2019
Secretary of State
4835144482CR

Current Mailing Address:

169 E FLAGLER STREET SUITE 1300 MIAMI, FL 33131 US

FEI Number: 59-1627141 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: BRENNA LUTTER AST. SECRETARY 01/18/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title CHAIRMAN, DIRECTOR

Name STEINBERG, RICHARD E Name WADHAMS, JAMES

Address PO BOX 94738 Address C/O FENNEMORE, CRAID, JONES,

VARGAS

City-State-Zip: LAS VEGAS NV 89193-4738 B OF A BLDG., 300 S. 4TH STREET

1400

Title DIRECTOR City-State-Zip: LAS VEGAS NV 89101

Name WALSH, THOMAS II

Title DIRECTOR

Address 180 28TH AVE NORTH

Name PORTER, WILLIAM

City-State-Zip: ST. PETERSBURG FL 33704

Address 1212 E ANDY DEVINE AVE., #101

Title DIRECTOR City-State-Zip: KINGMAN AZ 86401

Name BOAZMAN, DERRICK

Address C/O URBAN PLANNING SOLUTIONS Title DIRECTOR

1860 BOND DRIVE Name ABADIN, RAMON

City-State-Zip: ATLANTA GA 30315 Address ONE BISCAYNE TOWER, SUITE 1500

TWO SOUTH BISCAYNE BLVD.

Title TREASURER City-State-Zip: MIAMI FL 33131-1822

Name ORTBALS, KEN

Address 1711 WHITNEY MESA DR Title SECRETARY

City-State-Zip: HENDERSON NV 89014

Title SECRETARY

Name HANNA, JIM

City-State-Zip: HENDERSON NV 89014

Address 1711 WHITNEY MESA DRIVE

City-State-Zip: HENDERSON NV 89014

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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: JIM HANNA CORP SECRETARY 01/18/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name OKADA, MARY

Address P.O. BOX 3566

City-State-Zip: HAGATNA OC 96932