

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: BRENNALUTTER.AST. SECRETARY

01/18/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name STEINBERG, RICHARD E
Address PO BOX 94738
City-State-Zip: LAS VEGAS NV 89193-4738

Title CHAIRMAN, DIRECTOR
Name WADHAMS, JAMES
Address C/O FENNEMORE, CRAID, JONES,
VARGAS
B OF A BLDG., 300 S. 4TH STREET
1400
City-State-Zip: LAS VEGAS NV 89101

Title DIRECTOR
Name WALSH, THOMAS II
Address 180 28TH AVE NORTH
City-State-Zip: ST. PETERSBURG FL 33704

Title DIRECTOR
Name PORTER, WILLIAM
Address 1212 E ANDY DEVINE AVE., #101
City-State-Zip: KINGMAN AZ 86401

Title DIRECTOR
Name BOAZMAN, DERRICK
Address C/O URBAN PLANNING SOLUTIONS
1860 BOND DRIVE
City-State-Zip: ATLANTA GA 30315

Title DIRECTOR
Name ABADIN, RAMON
Address ONE BISCAYNE TOWER, SUITE 1500
TWO SOUTH BISCAYNE BLVD.
City-State-Zip: MIAMI FL 33131-1822

Title TREASURER
Name ORTBALS, KEN
Address 1711 WHITNEY MESA DR
City-State-Zip: HENDERSON NV 89014

Title SECRETARY
Name HANNA, JIM
Address 1711 WHITNEY MESA DRIVE
City-State-Zip: HENDERSON NV 89014

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.

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