

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756490

**FILED**  
**Feb 06, 2019**  
**Secretary of State**  
**3430589619CC**

**Entity Name:** FEEDING SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

2501 SW 32 TERRACE  
PEMBROKE PARK, FL 33023

**Current Mailing Address:**

2501 SW 32 TERRACE  
PEMBROKE PARK, FL 33023

**FEI Number:** 59-2097520

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VELEZ, FRANCISCO R  
2501 SW 32 TERRACE  
PEMBROKE PARK, FL 33023 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name VELEZ, FRANCISCO  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title BOARD CHAIR  
Name SISKIND, HARRIS  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title TREASURER  
Name GONZALEZ, BENNY J.  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title SECRETARY  
Name RIVERA, EDUARDO  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name BLOCK, MICHAEL  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name BOLTON, CAROLYN  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name DEL CAMPO, HENRY  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name HSIEH, DON  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

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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:** FRANCISCO VELEZ

**PRESIDENT & CEO**

**02/06/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MCCABE, ROBERT  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name MELLGREN, CHRIS  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name ALVAREZ, ALAN  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name PIET, MAX  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name FLETCHER, WILLIAM  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name ALONSO, JOSE  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name MURPHY, KELLY  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name PREVOST, DAVID  
Address 2501 SW 32 TERRACE  
City-State-Zip: PEMBROKE PARK FL 33023