

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003511

Entity Name: EVCLAY/PRSA MIAMI CHAPTER ENDOWMENT FUND, INC.**Current Principal Place of Business:**355 ALHAMBRA CIRCLE, SUITE 800
CORAL GABLES, FL 33134**Current Mailing Address:**355 ALHAMBRA CIRCLE, SUITE 800
CORAL GABLES, FL 33134 US**FEI Number:** 65-1016808**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ERICSON, SANDRA F
355 ALHAMBRA CIRCLE, SUITE 800
CORAL GABLES, FL 33134 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:** SANDRA ERICSON

03/28/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name VALDES, JENNIFER
Address RBB COMMUNICATIONS
355 ALHAMBRA CIR STE 800
City-State-Zip: MIAMI FL 33134

Title PRESIDENT
Name MIKULSKI, LILYVANIA
Address CODINA PARTNERS
2020 SALZEDO ST 5TH FL
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER
Name MICHAEL, RADLICK
Address RBB COMMUNICATIONS
355 ALHAMBRA CIR STE 800
City-State-Zip: MIAMI FL 33134

Title VP
Name LUGONES, JULIETA
Address FUSION COMMUNICATIONS
8725 NW 18TH TERR STE 103
City-State-Zip: MIAMI FL 33172

Title FUND CHAIR
Name ERICSON, SANDRA FINE
Address 355 ALHAMBRA CIRCLE, SUITE 800
City-State-Zip: CORAL GABLES FL 33134

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: SANDRA ERICSON

FUND CHAIR

03/28/2018

Electronic Signature of Signing Officer/Director Detail

Date