

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003718

Entity Name: MARIAN CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**12100 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161**Current Mailing Address:**12100 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161**FEI Number:** 65-1051283**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCDEARMAID, MICHAEL
12100 WEST DIXIE HIGHWAY
1806
NORTH MIAMI, FL 33161 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	DP
Name	MCDEARMAID, MICHAEL
Address	840 N.E. 127TH STREET
City-State-Zip:	N MIAMI BEACH FL 33161

Title	DS
Name	MARINELLO, LEONARD
Address	5000 EAST 10TH COURT
City-State-Zip:	HIALEAH FL 33013

Title	D
Name	MCENROE, JOHN
Address	13510 SW 6 PLACE
City-State-Zip:	DAVIE FL 33325

Title	DIRECTOR
Name	SEIFRIED, KEVIN SECRETARY
Address	12665 N.W. 8 TH AVENUE
City-State-Zip:	NORTH MIAMI FL 33168

Title	DIRECTOR
Name	SMITH, STEVE DIRECTOR
Address	11711 WEST BISCAYNE CANAL ROAD
City-State-Zip:	MIAMI FL 33161

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: MICHAEL MCDEARMAID

PRESIDENT

05/31/2021

Electronic Signature of Signing Officer/Director Detail_____
Date