## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000700

Entity Name: THE DIANNE T. AND CHARLES E. RICE FAMILY FOUNDATION,

INC.

**FILED** Mar 15, 2022 Secretary of State 8515695815CC

## **Current Principal Place of Business:**

BESSEMER TR CO OF FLORIDA 801 BRICKELL AVE MIAMI, FL 33131

## **Current Mailing Address:**

C/O BESSEMER TRUST CO 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020 US

FEI Number: 59-3701678 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RICE, C. DANIEL BESSEMER TR CO OF FLORIDA 801 BRICKELL AVE MIAMI, FL 33131 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title

GREEN, CELESTE R RICE, DIANNE T Name Name

Address C/O BESSEMER TRUST CO OF Address C/O BESSEMER TRUST CO OF

> **FLORIDA FLORIDA** 801 BRICKELL AVE

801 BRICKELL AVE

MIAMI FL 33131 City-State-Zip: MIAMI FL 33131 City-State-Zip:

Title D Title D

Name RICE, CHARLES DANIEL Name RICE, JULIE F

Address C/O BESSEMER TRUST CO OF Address C/O BESSEMER TRUST CO OF **FLORIDA** 

**FLORIDA** 

801 BRICKELL AVE 801 BRICKELL AVE

MIAMI FL 33131 City-State-Zip: City-State-Zip: MIAMI FL 33131

Title

Name MITCHELL, THOMAS RICE

C/O BESSEMER TRUST CO OF Address

FI ORIDA

801 BRICKELL AVE

City-State-Zip: MIAMI FL 33131

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: CELESTE RICE GREEN DIR 03/15/2022