

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000007020

**Entity Name:** OUR KIDS OF MIAMI-DADE/MONROE, INC.

**Current Principal Place of Business:**

401 NW 2ND AVE  
SOUTH TOWER, 10TH FLOOR  
MIAMI, FL 33128

**Current Mailing Address:**

PO BOX 010951  
MIAMI, FL 33101 US

**FEI Number: 57-1140890**

**Certificate of Status Desired: No**

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

PENNEKAMP, J MICHAEL  
FOWLER WHITE BURNETT, P.A.  
1395 BRICKELL AVE, 14TH FLOOR  
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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           BOARD CHAIR  
Name           BOHRER, SANDY  
Address        701 BRICKELL AVENUE, SUITE 3000  
City-State-Zip: MIAMI FL 33131

Title           TREASURER  
Name           DEAS, RICHARD  
Address        1441 BRICKELL AVENUE  
                  SUITE 1100  
City-State-Zip: MIAMI FL 33131

Title           SECRETARY  
Name           RUSS, GINA S  
Address        2800 SUNSET DRIVE  
City-State-Zip: MIAMI BEACH FL 33140

Title           AT LARGE  
Name           LICKO, CAROL AESQ  
Address        200 SOUTH BISCAYNE BLVD., SUITE  
                  400  
City-State-Zip: MIAMI FL 33131

Title           CHIEF EXECUTIVE OFFICER  
Name           GONZALEZ, JACKIE  
Address        SOUTH TOWER, 10TH FLOOR  
City-State-Zip: MIAMI FL 33128

*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: JACKIE GONZALEZ**

**CEO**

**04/03/2015**

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

\_\_\_\_\_  
Date