

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000000312

**FILED**  
**Feb 18, 2013**  
**Secretary of State**  
**CC8606196613**

**Entity Name:** FLORIDA PHILANTHROPIC NETWORK, INC.

**Current Principal Place of Business:**

1211 N. WESTSHORE BOULEVARD  
SUITE 314  
TAMPA, FL 33607

**Current Mailing Address:**

1211 N. WESTSHORE BOULEVARD  
SUITE 314  
TAMPA, FL 33607 US

**FEI Number:** 20-1328734

**Certificate of Status Desired:** No

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

BIEMESDERFER, DAVID J  
1211 N. WESTSHORE BOULEVARD  
SUITE 314  
TAMPA, FL 33607 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 C  
Name BREWER, MARK  
Address 1411 EDGEWATER DRIVE, SUITE 203  
City-State-Zip: ORLANDO FL 32804

Title VC  
Name TOWLER, SUSAN  
Address 4800 DEER CAMPUS PARKWAY  
BUILDING 300  
City-State-Zip: JACKSONVILLE FL 32246

Title S/T  
Name SCANLAN, KATIE  
Address P.O. BOX 31590  
City-State-Zip: TAMPA FL 33631

Title ASST. VP, CORP. PHIL.  
Name BENTLEY, KIM  
Address 111 JIM MORAN BLVD.  
City-State-Zip: DEERFIELD BEACH FL 33442

Title PROG. DIR.  
Name HAGGMAN, MATT  
Address 200 SOUTH BISCAYNE BLVD.,  
SUITE 3300  
City-State-Zip: MIAMI FL 33131

Title PRESIDENT/CEO  
Name MADDOX, PATTY  
Address 220 EDINBURGH DRIVE  
City-State-Zip: WINTER PARK FL 32792

Title PRESIDENT/CEO  
Name MARCUS, STEVE  
Address TWO SOUTH BISCAYNE BLVD.,  
SUITE 1710  
City-State-Zip: MIAMI FL 33131

Title SR. VP/CCO  
Name SMITH, IAN  
Address 100 N. TAMPA STREET  
SUITE 1625  
City-State-Zip: TAMPA FL 33602

**Continues on page 2**

*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:** DAVID BIEMESDERFER

**PRESIDENT & CEO**

**02/18/2013**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            PRESIDENT/CEO  
Name            SOTO, JAVIER  
Address        200 SOUTH BISCAYNE BLVD.,  
                  SUITE 505  
City-State-Zip: MIAMI FL 33131

Title            PRESIDENT/CEO  
Name            BIEMESDERFER, DAVID  
Address        1211 N. WESTSHORE BOULEVARD  
                  SUITE 314  
City-State-Zip: TAMPA FL 33607