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

DOCUMENT# N03000000312

Entity Name: FLORIDA PHILANTHROPIC NETWORK, INC.

**FILED** Mar 02, 2015 Secretary of State CC5809162903

### **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:

City-State-Zip:

TAMPA FL 33602

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT/CEO Title С

Name BREWER, MARK Name TOWLER, SUSAN

800 NORTH MAGNOLIA AVENUE 4800 DEER CAMPUS PARKWAY Address Address

**SUITE 1200 BUILDING 300** 

City-State-Zip: ORLANDO FL 32803 City-State-Zip: JACKSONVILLE FL 32246

SVP, METRO EAST MARKETS & Title ASST. VP, CORP. PHIL. Title

CENTRALIZED OPERATIONS Name BENTLEY, KIM

**EXECUTIVE** 

Address 111 JIM MORAN BLVD. Name SCANLAN, KATIE

City-State-Zip: DEERFIELD BEACH FL 33442 Address P.O. BOX 31590, FL1-400-16-08

City-State-Zip: TAMPA FL 33631 Title VC

Name MADDOX, PATTY Title VICE PRESIDENT, HUMAN

> **RESOURCES & ADMINISTRATION** Address 220 EDINBURGH DRIVE

Name COUDREAUT, TERESE WINTER PARK FL 32792 City-State-Zip:

200 SOUTH BISCAYNE BOULEVARD Address

**SUITE 3300** Title PRESIDENT/CEO

City-State-Zip: MIAMI FL 33131 Name SOTO, JAVIER

Address 40 NW 3RD STREET Title SR. VP/CCO SUITE 305

Name SMITH, IAN City-State-Zip: MIAMI FL 33128

Address 100 N. TAMPA STREET

**SUITE 1625** 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: CARLA BATTS (SIGNING ON BEHALF OF DAVID **BIEMESDERFER**)

OFFICE MANAGER

03/02/2015

Electronic Signature of Signing Officer/Director Detail

## Officer/Director Detail Continued:

TitlePRESIDENT/CEOTitlePRESIDENT/CEONameBIEMESDERFER, DAVIDNameHANSEN, TERI

Address 1211 N. WESTSHORE BOULEVARD Address 601 TAMIAMI TRAIL SOUTH

SUITE 314

Title REGIONAL VICE PRESIDENT, MIAMI-DADE

Name MILANES, MIGUEL
Address 2050 CORAL WAY

SUITE 200

City-State-Zip: MIAMI FL 33145

City-State-Zip: TAMPA FL 33607

Title TRUSTEE

City-State-Zip:

Name SMITH JUAREZ, ASHLEY
Address 2767 FOREST CIRCLE
City-State-Zip: JACKSONVILLE FL 32257

VENICE FL 34285