

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000001415

**Entity Name:** SERAPHIC FIRE, INC.

**Current Principal Place of Business:**

2153 CORAL WAY  
SUITE 401  
MIAMI, FL 33145

**Current Mailing Address:**

2153 CORAL WAY  
SUITE 401  
MIAMI, FL 33145

**FEI Number:** 20-0725426

**Certificate of Status Desired:** No

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

CHUCHLA, ROSS A  
2153 CORAL WAY  
401  
MIAMI, FL 33145 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:** ROSS CHUCHLA

01/24/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            FOUNDRING CHAIRMAN  
Name            SCHULTE, JOANNE N  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: MIAMI FL 33145

Title            BOARD CHAIR  
Name            FOTIU-WOJTOWICZ, ALAINA  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: MIAMI FL 33145

Title            TREASURER  
Name            ROLANDO, MARGARET  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: MIAMI FL 33145

Title            SECRETARY  
Name            BOYD, THOMAS C DR.  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: MIAMI FL 33145

Title            VICE CHAIR  
Name            BRINKER, ROBERT  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: MIAMI FL 33145

Title            DIRECTOR  
Name            COPHER, DANIEL  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: MIAMI FL 33145

Title            DIRECTOR  
Name            ANDERSON, MATTHEW  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: CORAL GABLES FL 33145

Title            DIRECTOR  
Name            MARMOL, ANA  
Address        2153 CORAL WAY SUITE 401  
City-State-Zip: CORAL GABLES FL 33145

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*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:** ALAINA FOTIU-WOJTOWICZ

BOARD CHAIR

01/24/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name PICHARDO, CAROLYN  
Address 2153 CORAL WAY SUITE 401  
City-State-Zip: CORAL GABLES FL 33145

Title DIRECTOR  
Name POLZIN, CLAUDIA  
Address 2153 CORAL WAY  
SUITE 401  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name ASHLEY, DIANE  
Address 2153 CORAL WAY  
SUITE 401  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name TROWBRIDGE, MARK  
Address 2153 CORAL WAY SUITE 401  
City-State-Zip: CORAL GABLES FL 33145

Title DIRECTOR  
Name JAUME, WILLIAM  
Address 2153 CORAL WAY  
SUITE 401  
City-State-Zip: MIAMI FL 33145