

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 08, 2014
Secretary of State
CC7419928542

Entity Name: BURGER KING MCLAMORE FOUNDATION, INC.

Current Principal Place of Business:

5505 BLUE LAGOON DRIVE
MIAMI, FL 33126

Current Mailing Address:

5505 BLUE LAGOON DRIVE
MIAMI, FL 33126 US

FEI Number: 06-1765327

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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 DIRECTOR & PRESIDENT
Name GRANAT, JILL
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name COMSTOCK, JERRY
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name LEWIS, STEVE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name LILLANEY, JILL
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name MYERS, JIM
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name PATTISON, STEVE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name ST. JUSTE, ROBES
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title TREASURER
Name FRIESNER, JACKIE
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

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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: LISA GILES-KLEIN

SECRETARY

04/08/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name GILES-KLEIN, LISA
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title ASSISTANT SECRETARY
Name SCHAFFER, ROBIN
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126

Title EXECUTIVE DIRECTOR (OFFICER)
Name TEJADA, ANDREA
Address 5505 BLUE LAGOON DRIVE
City-State-Zip: MIAMI FL 33126