

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

DOCUMENT# N05000011946

**Entity Name:** SWIRE CARBONELL SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

501 BRICKELL KEY DR SUITE 600  
MIAMI, FL 33131

**Current Mailing Address:**

501 BRICKELL KEY DR SUITE 600  
MIAMI, FL 33131

**FEI Number:** 26-1116096

**Certificate of Status Desired:** No

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

PEARSON, DALIA  
501 BRICKELL KEY DR SUITE 600  
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 D  
Name OWENS, STEPHEN L  
Address 501 BRICKELL KEY DR SUITE 600  
City-State-Zip: MIAMI FL 33131

Title D  
Name DAMIAN, CAROL  
Address 501 BRICKELL KEY DR SUITE 600  
City-State-Zip: MIAMI FL 33131

*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:** STEPHEN OWENS

04/14/2015

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

\_\_\_\_\_ Date