2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: MILES OF SMILES FOUNDATION, INC.

Current Principal Place of Business:

19810 GOTTARDE RD
N. FORT MYERS, FL 33917

Current Mailing Address:

5821 SUNNYSIDE LANE
FORT MYERS, FL 33919

FEI Number: 26-1325868

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DANIEL, DOXIE K
5821 SUNNYSIDE LANE
FT. MYERS, FL 33919 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	PRESIDENT
Name	DOXIE, DANIEL K
Address	5821 SUNNYSIDE LANE
City-State-Zip:	FORT MYERS FL 33919

Title	TREASURER
Name	MANKIN, TIMOTHY
Address	8667 SOUTH LAKE CIRCLE
City-State-Zip:	FORT MYERS FL 33908

Title	OFFICER
Name	BRIGHT, LESLIE J
Address	6816 AUTUMN CT
City-State-Zip:	NORTH FORT MYERS FL 33903

Title	OFFICER
Name	BEASLEY, RYAN
Address	16150 RAVINA WAY
City-State-Zip:	NAPLES FL 34110

Title	SECRETARY
Name	DOXIE, GAIL A
Address	5821 SUNNYSIDE LANE
City-State-Zip:	FORT MYERS FL 33919

Title	OFFICER
Name	IRWIN, CRAIG N
Address	756 CYPRESS GREEN CIRCLE
City-State-Zip:	WELLINGTON FL 33414

Title	OFFICER
Name	FITZGERALD, KELLY D
Address	2 S OSCEOLA AVE
City-State-Zip:	ORLANDO FL 32801

Title	OFFICER
Name	INGRAM, CHARLES
Address	13205 HAMPTON PARK CT
City-State-Zip:	FORT MYERS FL 33913

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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: GAIL DOXIE SECRETARY 04/07/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	OFFICER
Name	HARRIS BARTER, MARION
Address	4969 ESTERO BLVD
City-State-Zip:	FORT MYERS BEACH FL 33931