2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004212

Entity Name: ADRIENNE ARSHT CENTER FOUNDATION, INC.

FILED Apr 29, 2019 Secretary of State 5639169963CC

Current Principal Place of Business:

1300 BISCAYNE BLVD MIAMI. FL 33132

Current Mailing Address:

1300 BISCAYNE BLVD MIAMI, FL 33132 US

FEI Number: 26-2567808 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BERGER, THOMAS M. 1300 BISCAYNE BLVD MIAMI, FL 33132 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: THOMAS M. BERGER 04/29/2019

City-State-Zip:

MIAMI BEACH FL 33140

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title **SECRETARY**

ROCKER, DAVID Name Name BATCHELOR, NANCY 791 CRANDON BLVD 5451 PINE TREE DRIVE Address Address

APT 1206

City-State-Zip: KEY BISCAYNE FL 33149

TREASURER Title Title DIRECTOR

BARLICK, ROBERT JR. Name Name DIMARE, SWANEE

Address 200 SOUTH BISCAYNE BOULEVARD 10985 OLD CUTLER ROAD Address **SUITE 3700**

City-State-Zip: MIAMI FL 33131 City-State-Zip: CORAL GABLES FL 33156

Title **DIRECTOR** Title FOUNDING CHAIRMAN

Name BELL, TRISH ARSHT, ADRIENNE Name

Address 457 LEUCANDENDRA DRIVE Address 2221 30TH STREET NW City-State-Zip: CORAL GABLES FL 33156 City-State-Zip: WASHINGTON DC 20008

Title CHAIRMAN **DIRECTOR** Title ARGIZ, ANTONIO Name Name CAPLIN, LEE E.

Address MORRISON, BROWN, ARGIZ & Address

60 EDGEWATER DRIVE **APARTMENT 8G** FARRA, LLP

1450 BRICKELL AVENUE 18TH FLOOR City-State-Zip: CORAL GABLES FL 33133

> City-State-Zip: MIAMI FL 33131

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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.

04/29/2019 SIGNATURE: ANTONIO ARGIZ **CHAIRMAN**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

MIAMI FL 33131

Name

DIRECTOR Title Title DIRECTOR

HAINES, JEFF Name GREEN, KIMBERLY Name

Address WELLS FARGO Address **GREEN FAMILY FOUNDATION** 200 BISCAYNE BOULEVARD 15TH FLOOR

7300 BISCAYNE BOULEVARD SUITE

City-State-Zip: City-State-Zip: MIAMI FL 33138

DIRECTOR Title Title **DIRECTOR** CENTNER, LEILA

Name GUERRERI, ANDREA Address **5025 COLLINS AVENUE** 50 S. POINTE DRIVE

PENTHOUSE Address NORTH TOWER, UNIT 610 MIAMI BEACH FL 33140

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip:

Title DIRECTOR Title DIRECTOR KAUFMAN, JAMES Name

Name JOHNSON, ERIC Address 3373 POINCIANA AVENUE

5254 FISHER ISLAND DRIVE Address City-State-Zip: COCONUT GROVE FL 33133

City-State-Zip: MIAMI BEACH FL 33109