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: CHARLES SIBLEY

City-State-Zip: HOMESTEAD FL 33035

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent

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.

Title	D	Title	D		
Name	SIBLEY, CHARLES	Name	KINN, MARY A		
Address	1201 SAN IGNACIO AVE	Address	8736 LAKE SHORE RO		
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	ANGOLA NY 14006		
Title	D				
Name	AGUILAR, DENISE B				
Address	1201 SE 29TH STREET #104-25				

Office

	<u> </u>		
er/Dire	ctor Detail :		
	D	Title	D
	SIBLEY, CHARLES	Name	KINN, N
s	1201 SAN IGNACIO AVE	Address	8736 LA
ate-Zip:	CORAL GABLES FL 33146	City-State-Zip:	ANGOL
	D		

1201 SAN IGNACIO AVE

Current Principal Place of Business:

DOCUMENT# N0900003960

CORAL GABLES, FL 33146

Current Mailing Address:

1201 SAN IGNACIO AVE CORAL GABLES. FL 33146

FEI Number: 27-0434233

Name and Address of Current Registered Agent:

GOLDBERG, ADAM S 1792 BELL TOWER LANE WESTON, FL 33326 US

SIGNATURE:

Entity Name: CURTISS F. SIBLEY CHARITABLE FOUNDATION, INC.

FILED Mar 30, 2017 Secretary of State CC8362685589

Certificate of Status Desired: Yes

DAD

03/30/2017

Date

Date

DIRECTOR