

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 25, 2013
Secretary of State
CC1883888308

Entity Name: MEDINA FAMILY FOUNDATION, INC.

Current Principal Place of Business:

COURVOISIER CENT I
501 BRICKELL KEY DR., STE 200
MIAMI, FL 33131

Current Mailing Address:

COURVOISIER CENT I
501 BRICKELL KEY DR., STE 200
MIAMI, FL 33131

FEI Number: 27-5019542

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE, SUITE 125
CORAL GABLES, FL 33146 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 PD
Name MEDINA-SCHNUR, MELISSA
Address 2200 SEGOVIA CIRCLE
City-State-Zip: CORAL GABLES FL 33134

Title VPD
Name MEDINA, LISETTE
Address 7946 FISHER ISLAND DRIVE
City-State-Zip: MIAMI FL 33109

Title SD
Name MEDINA, MANUEL DJR.
Address 527 8TH AVENUE SOUTH, #303
City-State-Zip: NASHVILLE FL 33109

Title TD
Name SCHNUR, LONNY
Address 2200 SEGOVIA CIRCLE
City-State-Zip: CORAL GABLES FL 33134

Title D
Name MEDINA, MANUEL D
Address 501 BRICKELL KEY DR., STE 200,
COURVOISIER
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: MELISSA MEDINA-SCHNUR

PRESIDENT

02/25/2013

Electronic Signature of Signing Officer/Director Detail

Date