

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001618

Entity Name: MEDINA FAMILY FOUNDATION, INC.

Current Principal Place of Business:

2333 PONCE DE LEON BLVD
SUITE 900
CORAL GABLES, FL 33134

Current Mailing Address:

2333 PONCE DE LEON BLVD
SUITE 900
CORAL GABLES, FL 33134 US

FEI Number: 27-5019542

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES REGISTERED AGENTS, INC.
420 S. DIXIE HIGHWAY
SUITE 4B
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: JOHN L HOFMANN

04/24/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name MEDINA-SCHNUR, MELISSA
Address 2333 PONCE DE LEON BLVD
SUITE 900
City-State-Zip: CORAL GABLES FL 33134

Title VPD
Name MEDINA, LISETTE
Address 2333 PONCE DE LEON BLVD
SUITE 900
City-State-Zip: CORAL GABLES FL 33134

Title SD
Name MEDINA, MANUEL DJR.
Address 375 MONROE STREET
City-State-Zip: NASHVILLE TN 37208

Title D
Name MEDINA, MANUEL D
Address 2333 PONCE DE LEON BLVD
SUITE 900
City-State-Zip: CORAL GABLES FL 33134

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: MANUEL D. MEDINA

DIRECTOR

04/24/2017

Electronic Signature of Signing Officer/Director Detail

Date