

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000002353

**Entity Name:** WISEHEART FOUNDATION, INC.

**Current Principal Place of Business:**

2840 S.W. THIRD AVENUE  
SUITE 200  
MIAMI, FL 33129-2317

**Current Mailing Address:**

2840 S.W. THIRD AVENUE  
SUITE 200  
MIAMI, FL 33129-2317 US

**FEI Number:** 59-0992871

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MILNE, CAROLYN W  
Address 2840 S.W. THIRD AVENUE  
SUITE 200  
City-State-Zip: MIAMI FL 33129-2317

Title S/T  
Name JOYCE, ELIZABETH W  
Address 2840 S.W. THIRD AVENUE  
SUITE 200  
City-State-Zip: MIAMI FL 33129-2317

Title VP  
Name WISEHEART, MICHELE R  
Address 2840 S.W. THIRD AVENUE  
SUITE 200  
City-State-Zip: MIAMI FL 33129-2317

*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:** MICHELE R. WISEHEART

VP

03/27/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date