

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006001

Entity Name: THE CARYL LOUISE BOIES MEMORIAL FOUNDATION, INC.**Current Principal Place of Business:**801 N RIO VISTA BLVD
FT LAUDERDALE, FL 33301**Current Mailing Address:**801 N RIO VISTA BLVD
FT LAUDERDALE, FL 33301**FEI Number: 30-0692504****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MANISCALCO, CARYL
801 N RIO VISTA BLVD
FT LAUDERDALE, FL 33301 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 D
Name MANISCALCO, CARYL
Address 801 N RIO VISTA BLVD
City-State-Zip: FT LAUDERDALE FL 33301

Title D
Name MILLER, BARBARA
Address 442 POINCIANA DR
City-State-Zip: HALLANDALE FL 33009

Title D
Name MCCAWLEY, SIGRID
Address 1331 PONCE DE LEON DR
City-State-Zip: FT LAUDERDALE FL 33316

Title D
Name TOOTHAKER, STEPHANIE
Address 901 PONCE DE LEON DR
City-State-Zip: FT LAUDERDALE FL 33316

Title D
Name BOIES, DAVID III
Address 4041 UNIVERSITY DRIVE
5TH FLOOR
City-State-Zip: FAIRFAX VA 22030

Title DIRECTOR
Name BINDER, JONATHAN
Address 1014 NE 5TH STREET
City-State-Zip: FT. LAUDERDALE FL 33301

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: SIGRID S. MCCAWLEY**DIRECTOR****01/11/2018**

Electronic Signature of Signing Officer/Director Detail

Date