2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2019
Secretary of State
9487449376CC

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Entity Name: ALEXANDRIAN FORUM, INC.

Current Principal Place of Business:

2708 NE 30TH STREET
FORT LAUDERDALE , FL 33306

Current Mailing Address:

2708 NE 30TH STREET
FORT LAUDERDALE , FL 33306 US

FEI Number: 45-5585146

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAUL R. ALFIERI, P.L.
5143 NW 42 TERRACE
COCONUT CREEK, FL 33073 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	DIRECTOR
Name	BARBER, CHRISTOPHER D
Address	ONE FINANCIAL PLAZA, SUITE 2602
City-State-Zip:	FT. LAUDERDALE FL 33394

Title	DIRECTOR
Name	STELLFOX, KENDELL
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR
Name	MANCINI, LEE ANN
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	TREASURER, SECRETARY
Name	GAGE, LEAH G
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR, PRESIDENT
Name	GAGE, WARREN A
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR, CHAIRMAN
Name	HENDRIKSE, THOMAS
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR
Name	FEE, DAVID
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR
Name	DAVELL, WILLIAM
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

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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: LEAH GAGE TREASURER 01/22/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MOSES, TED
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR
Name	STORRS, WILLIAM
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR
Name	OLLIFF, THOMAS
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306

Title	DIRECTOR
Name	KASTENSMIDT, SAMUEL
Address	2708 NE 30TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33306