Entity Name: THE ANCIENT SPANISH MONASTERY FOUNDATION,
INCORPORATED.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**Current Principal Place of Business:** 

16711 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33160

DOCUMENT# N12000007093

### **Current Mailing Address:**

16711 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33160

#### FEI Number: NOT APPLICABLE

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

MANSFIELD, GREGORY DR. 16711 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33160 US Certificate of Status Desired: No

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

# **Officer/Director Detail :**

Title	PRESIDENT	Title	TRUSTEE				
Name	GREENLEAF, JANIE DR.	Name	RUDNEV, DENIS				
Address	3440 NORTHEAST 192 STREET, SUITE A2M	Address	16500 COLLINS AVE., #752				
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	SUNNY ISLES BEACH FL 33160				
Title	TREASURER	Title	CEO				
Name	WALKER, KIM	Name	MANSFIELD, GREGORY DR.				
Address	707 NE 112 STREET	Address	3001 SOUTH OCEAN DRIVE 1031				
City-State-Zip:	BISCAYNE PARK FL 33161	City-State-Zip:	HOLLYWOOD FL 33019				
Title	OTHER	Title Name Address	VP				
Name	BRADSHAW, RUBYANN		DAVIS, JOYCE L				
Address	432 NW 111 TERRACE		500 NE 2 STREET 227				
City-State-Zip:	MIAMI SHORES FL 33023						
Title	DIRECTOR	City-State-Zip:	DANIA BEACH FL 33004				
		Title	DIRECTOR				
Name	GOMEZ, ROSAMON L.						
Address	11260 SW 138 STREET	Name	VALLEJO, SANDY				
City-State-Zip:	MIAMI FL 33176	Address	2940 N.E. 164TH STREET				
		City-State-Zip:	NORTH MIAMI BEACH FL 33160				

## Continues on page 2

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: DR. JANIE GREENLEAF	PRESIDENT	03/31/2017

Electronic Signature of Signing Officer/Director Detail

FILED Mar 31, 2017 Secretary of State CC9533638669

Date

Date

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	MARKARIAN, DANIEL DR.	Name	NEUFELD, JASON ESQ.
Address	23398 S.W. 57TH AVENUE	Address	2641 N.E. 191 STREET
City-State-Zip:	UNIT 310 BOCA RATON FL 33428	City-State-Zip:	AVENTURA FL 33180
Title	TRUSTEE	Title	DIRECTOR
Name		Name	JOHNSON, KASIA
		Address	466 SE 14TH STREET
Address	334 WEST 25TH STREET APT 9	City-State-Zip:	DANIA BEACH FL 33004
City-State-Zip:	MIAMI BEACH FL 33140	Title	TRUSTEE
Title	DIRECTOR	Name	DONOWAY, ROBERT DR.
Name	BENEDICT, ELSA	Address	3101 SOUTH OCEAN DRIVE
Address	1300 ST. CHARLES PLACE #617	City-State-Zip:	UNIT 508 HOLLYWOOD FL 33019
City-State-Zip:			