

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12127

**Entity Name:** MAKE-A-WISH FOUNDATION OF SOUTHERN FLORIDA, INC.

**FILED**  
**Apr 02, 2019**  
**Secretary of State**  
**9766340077CC**

**Current Principal Place of Business:**

4491 S STATE ROAD 7  
STE 201  
FT LAUDERDALE, FL 33314

**Current Mailing Address:**

4491 S STATE ROAD 7  
STE 201  
FT LAUDERDALE, FL 33314 US

**FEI Number:** 59-2620322

**Certificate of Status Desired:** No

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

WEDDERBURN, NORMAN E  
4491 S STATE ROAD 7  
STE 201  
FT LAUDERDALE, FL 33314 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:** NORMAN WEDDERBURN

04/02/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           SIRAVO, JODI  
Address        4491 S STATE ROAD 7 STE 201  
City-State-Zip: FT. LAUDERDALE FL 33314

Title           BOARD CHAIR  
Name           PRESS, ROBERT  
Address        4491 S STATE ROAD 7 STE 201  
City-State-Zip: FT LAUDERDALE FL 33314

Title           CHAIR-ELECT  
Name           BATY, GREG  
Address        4491 S STATE ROAD 7 STE 201  
City-State-Zip: FT LAUDERDALE FL 33314

Title           CEO  
Name           WEDDERBURN, NORMAN E  
Address        4491 S STATE ROAD 7 STE 201  
City-State-Zip: FT LAUDERDALE FL 33314

Title           COO  
Name           KELLY, RICHARD  
Address        4491 S STATE ROAD 7  
STE 201  
City-State-Zip: FT LAUDERDALE FL 33314

Title           VP, MISSION RESOURCES  
Name           TROUBA, WANDA  
Address        4491 S STATE ROAD 7  
STE 201  
City-State-Zip: FT LAUDERDALE FL 33314

Title           VP, MISSION DELIVERY  
Name           MULLINS, KAREN  
Address        4491 S STATE ROAD 7  
STE 201  
City-State-Zip: FT LAUDERDALE FL 33314

Title           CFO  
Name           JACKSON, BETH  
Address        4491 S STATE ROAD 7  
STE 201  
City-State-Zip: FT LAUDERDALE FL 33314

*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:** NORMAN WEDDERBURN

**PRESIDENT/CEO**

04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date