

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

DOCUMENT# N13000005030

**FILED**  
**Jan 16, 2018**  
**Secretary of State**  
**CC8834654472**

**Entity Name:** KERRY AND SIMONE VICKAR FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

112 S TRYON ST SUITE 200  
CHARLOTTE, NC 28284

**Current Mailing Address:**

112 S TRYON ST SUITE 200  
CHARLOTTE, NC 28284 US

**FEI Number:** 34-1974937

**Certificate of Status Desired:** No

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

KOCHE, DAVID L  
601 BAYSHORE BLVD SUITE 700  
TAMPA, FL 33606 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 VICKAR, L KERRY  
Address 112 S TRYON ST SUITE 200  
City-State-Zip: CHARLOTTE NC 28284

Title PRESIDENT  
Name VICKAR, SIMONE D  
Address 112 S TRYON ST SUITE 200  
City-State-Zip: CHARLOTTE NC 28284

Title D  
Name VICKAR, ERIC L  
Address 112 S TRYON ST SUITE 200  
City-State-Zip: CHARLOTTE NC 28284

Title TREASURER  
Name GIFFORD, JEFFREY R  
Address 112 S TRYON ST SUITE 200  
City-State-Zip: CHARLOTTE NC 28284

*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:** VICKAR , L KERRY

D

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date