# SIGNATURE: KATHLEEN MURPHY

Electronic Signature of Signing Officer/Director Detail

#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N13367

Entity Name: MIAMI BAYSIDE FOUNDATION, INC.

### **Current Principal Place of Business:**

25 SE 2ND AVENUE SUITE 240 MIAMI, FL 33131

#### **Current Mailing Address:**

25 SE 2ND AVENUE SUITE 240 MIAMI, FL 33131 US

#### FEI Number: 59-2834504

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

WELLER, PAMELA 401 BISCAYNE BLVD R-106 MIAMI, FL 33131 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

#### **Officer/Director Detail :**

Officer/Director Detail :					
	Title	т	Title	V	
	Name	CORREA, JOSIE E	Name	WELLER, PAMELA	
	Address	25 SE 2 AVE #240	Address	401 BISCAYNE BLVD R-106	
	City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	
	Title	D	Title	D	
	Name	AEDO, ROLANDO	Name	CARMONA, BENITO	
	Address	701 BRICKELL AVENUE, SUITE 2700	Address	2020 PONCE DE LEON BLVD, STE 101	
	City-State-Zip:	MIAMI FL 33131	City-State-Zip:	CORAL GABLES FL 33034	
	Title	CHAIR	Title	SECRETARY	
	Name	KURLAND, NATHAN	Name	EWAN, NICOLE	
	Address	25 SE 2ND AVENUE SUITE 240	Address	25 SE 2ND AVENUE SUITE 240	
	City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	
	Title	DIRECTOR	Title	DIRECTOR	
	Name	BARTON KING, MICHELLE	Name	CAZEAU, JEFF	
		25 SE 2ND AVENUE SUITE 240	Address	25 SE 2ND AVENUE SUITE 240	
	City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	

#### 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.

#### 03/09/2016 EXECUTIVE DIRECTORE

Date

## FILED Mar 09, 2016 Secretary of State CC2047700986

Date

Certificate of Status Desired: No

### **Officer/Director Detail Continued :**

City-State-Zip: MIAMI FL 33131

Title	DIRECTOR	Title	DIRECTOR
Name	MCMILLIAN, LOUIS	Name	MORTON, ELIZABETH
Address	25 SE 2ND AVENUE SUITE 240	Address	25 SE 2ND AVENUE SUITE 240
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	DIRECTOR	Title	EXECUTIVE DIRECTOR
Name	DUNSHEE, ADAM	Name	MURPHY, KATHLEEN
Address	25 SE 2ND AVENUE SUITE 240	Address	25 SE 2ND AVENUE SUITE 240
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	DIRECTOR		
Name	HIDALGO, YANNY		
Address	25 SE 2ND AVENUE 240		