# 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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	DIRECTOR	Title	VC	
	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 Name	D AEDO, ROLANDO	Title Name	D CARMONA, BENITO	
		,	Address		
	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	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.

SIGNATURE: MS. KATHLEEN MURPHY

EXECUTIVE DIRECTOR 03/02

03/02/2023

Date

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 02, 2023 Secretary of State 7385564657CC

Certificate of Status Desired: Yes

Date

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	TREASURER
Name	MCMILLIAN, LOUIS	Name	CANESSA-GONZALEZ, SONIA
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	Title	DIRECTOR
Name	GORDON, ANDREW	Name	BINNS, BASIL
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		

NameNIETO, EDGARAddress25 SE 2ND AVENUE<br/>SUITE 240City-State-Zip:MIAMI FL 33131