

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000006309

Entity Name: THE OCTAVE'S FAMILY FOUNDATION, INC.

Current Principal Place of Business:

14424 SOUTH MILITARY TRAIL
DELRAY BEACH, FL 33484

Current Mailing Address:

14424 SOUTH MILITARY TRAIL
DELRAY BEACH, FL 33484 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OCTAVE, VENES
14424 SOUT MILITARY TRAIL
DELRAY BEACH, FL 33484 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 P
Name OCTAVE, DIEUNEL
Address 462 KESTOR DRIVE
City-State-Zip: PORT SAINT LUCIE FL 34953

Title S
Name OCTAVE, FRITZNEL
Address 2857 CARAMBOLA CIRCLE SOUTH
City-State-Zip: COCONUT CREEK FL 33066

Title M
Name ST MARTIN, JEAN RENEL
Address 731 NW 19TH STREET
City-State-Zip: FORT LAUDERDALE FL 33311

Title VP
Name OCTAVE, VENES
Address 19622 DINNER KEY DRIVE
City-State-Zip: BOCA RATON FL 33498

Title T
Name OCTAVE, CEREMY
Address 800 NE 41ST STREET
City-State-Zip: POMPANO BEACH FL 33064

Title A
Name OCTAVE, JOSEPH
Address 5330 NE 10TH AVENUE
City-State-Zip: POMPNO BEACH FL 33064

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: VENES OCTAVE

RA

04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date