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 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	
above, or on an attachment with all other like empowered.	

SIGNATURE: JOEL KAGAN

Electronic Signature of Signing Officer/Director Detail

Т ts registered office or registered agent, or both, in the State of Florida. SIGNATURE: JONATHAN M DRUCKER 03/27/2023

SIGNATURE	JONATHAN M. DROCKER			03/21/2023
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	D	Title	D	
Name	KAGAN, MARC ALAN	Name	KAGAN, JOEL RICHARD	
Address	44 PASEO DEL COYOTE	Address	8512 SUNSET WILLOW CT.	
City-State-Zip:	SANTA FE NM 87506	City-State-Zip:	ORLANDO FL 32835	
Title	D			
Name	GELLENBECK, ROSLYN ANN			
Address	8076 FLORENZA DRIVE			

(

City-State-Zip: BOYNTON BEACH FL 33437

The above named entity submit	's this statement for	the purpose of ch	nanging its

Name and Address of Current Registered Agent:

FEI Number: 81-2847023

JONATHAN M. DRUCKER, P.A. 2605 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33134 US

DOCUMENT# N1400008391

Entity Name: THE JACK KAGAN FOUNDATION, INC.

Current Principal Place of Business:

2605 PONCE DE LEON BLVD CORAL GABLES, FL 33134

Current Mailing Address:

2605 PONCE DE LEON BLVD CORAL GABLES. FL 33134 US

FILED Mar 27, 2023 Secretary of State 4772254414CC

Certificate of Status Desired: No

DIRECTOR

Date

03/27/2023

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT