

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000010696

**Entity Name:** BARRY KATZ AND SANDRA JAMES CHARITABLE  
FOUNDATION, INC.

**FILED**  
**Mar 27, 2017**  
**Secretary of State**  
**CC0351395742**

**Current Principal Place of Business:**

DBO R. TERRONE  
2121 PONCE DE LEON BLVD. #1100  
CORAL GABLES, FL 33134

**Current Mailing Address:**

DBO R. TERRONE  
2121 PONCE DE LEON BLVD. #1100  
CORAL GABLES, FL 33134 US

**FEI Number: 47-2458910**

**Certificate of Status Desired: No**

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

TRAUTMAN, EILEEN MS  
7450 SW 79 CT  
MIAMI, FL 33143 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,D                                  | Title           | VP,D            |
| Name            | KATZ, BARRY                          | Name            | JAMES, SANDRA   |
| Address         | 15451 SW 67 CT                       | Address         | 15451 SW 67 CT. |
| City-State-Zip: | MIAMI FL 33157                       | City-State-Zip: | MIAMI FL 33157  |
|                 |                                      |                 |                 |
| Title           | STD                                  |                 |                 |
| Name            | KATZ, BENJAMIN                       |                 |                 |
| Address         | 1301 EAST BROWARD BLVD. SUITE<br>300 |                 |                 |
| City-State-Zip: | FORT LAUDERDALE FL 33301             |                 |                 |

*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: BARRY KATZ**

**PRESIDENT/DIRECTOR**

**03/27/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date