

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000590

**Entity Name:** MIZE FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

3011 W EUCLID AVE  
TAMPA, FL 33629

**Current Mailing Address:**

9402 NORTH ROME CIRCLE  
TAMPA, FL 33612 US

**FEI Number:** 47-2916672

**Certificate of Status Desired:** Yes

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

MIZE, BIANCA  
3011 W EUCLID AVE  
TAMPA, FL 33629 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 D  
Name MIZE, BIANCA S EXEC.  
Address 3011 W EUCLID AVE  
City-State-Zip: TAMPA FL 33629

Title D  
Name BURKMAN, KRISTIN  
Address 9402 NORTH ROME CIRCLE  
City-State-Zip: TAMPA FL 33612

*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:** KRISTIN BURKMAN

**MANAGER**

**04/13/2023**

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

\_\_\_\_\_  
Date