

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000002487

**Entity Name:** RESILIENCE ACTION FUND INC.**Current Principal Place of Business:**441 NE 52ND STREET  
MIAMI, FL 33137**Current Mailing Address:**441 NE 52ND STREET  
MIAMI, FL 33137**FEI Number:** 47-3369805**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 DIRECTOR AND CHAIRMAN  
Name PAPADOPOULOS, ARIS  
Address 441 NE 52ND STREET  
City-State-Zip: MIAMI FL 33137

Title DIRECTOR  
Name PAPADOPOULOS, ELIZABETH  
Address 441 NE 52ND STREET  
City-State-Zip: MIAMI FL 33137

Title DIRECTOR  
Name FINK, RUSSELL  
Address 1713 HUNGERS PARISH CT  
City-State-Zip: VIRGINIA BEACH VA 23522

Title DIRECTOR  
Name PRINCE-WRIGHT, HOWARD  
Address ONE BASIL MANSIONS  
BASIL STREET  
City-State-Zip: LONDON SW31AP

Title DIRECTOR  
Name BARTH, FLORIAN  
Address 18001 WAGNER RD  
City-State-Zip: LOS GATOS CA 95032

*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:** ARIS PAPADOPOULOS**PRESIDENT****04/24/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date