

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

DOCUMENT# N16000011635

**Entity Name:** SIGNATURE GIVES BACK, INC.

**Current Principal Place of Business:**

901-C CLINT MOORE RD.  
BOCA RATON, FL 33487

**Current Mailing Address:**

901-C CLINT MOORE RD.  
BOCA RATON, FL 33487 US

**FEI Number: 81-4670795**

**Certificate of Status Desired: No**

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

JAIVEN, JACK  
901-C CLINT MOORE RD.  
BOCA RATON, FL 33487 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            PRESIDENT, DIRECTOR  
Name            SCHACTER, BEN  
Address        901-C CLINT MOORE RD.  
City-State-Zip: BOCA RATON FL 33487

Title            VP, TREASURER, DIRECTOR  
Name            JAIVEN, JACK  
Address        901-C CLINT MOORE RD.  
City-State-Zip: BOCA RATON FL 33487

Title            SECRETARY, DIRECTOR  
Name            KING JAIVEN, KRISTEN  
Address        901-C CLINT MOORE RD.  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR, VP  
Name            PRESSNER, WENDY  
Address        901-C CLINT MOORE RD.  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR, VP  
Name            BENJAMIN, IVAN M JR.  
Address        901-C CLINT MOORE RD.  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR  
Name            COHEN, ILLANA  
Address        901-C CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR  
Name            GOSS, JOHN JR.  
Address        901-C CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR, VP  
Name            LEVY, DANA  
Address        901-C CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL 33487

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*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: KRISTEN KING JAIVEN**

**SECRETARY**

**04/12/2019**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR, ASST. SECRETARY  
Name           CARRARA, ANDREA  
Address        901-C CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL 33487

Title           DIRECTOR  
Name           GUNNING, MELAINEY  
Address        901-C CLINT MOORE ROAD  
City-State-Zip: BOCA RATON FL 33487