

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000010630

**Entity Name:** THE LOWELL & MAURA KUVIN FOUNDATION INC

**Current Principal Place of Business:**

17 E FLAGLER ST  
223  
MIAMI, FL 33131

**Current Mailing Address:**

17 E FLAGLER ST  
223  
MIAMI, FL 33131

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LEE, KAREN E CPA  
1172 S DIXIE HWY  
#278  
MIAMI, FL 33146 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  
Name KUVIN, LOWELL  
Address 17 E FLAGLER ST SUITE 223  
City-State-Zip: MIAMI FL 33131

Title VP  
Name MITCHELL, MAURA  
Address 17 E FLAGLER ST SUITE 223  
City-State-Zip: MIAMI FL 33131

*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:** LOWELL J KUVIN

**MGR**

**07/31/2018**

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

\_\_\_\_\_  
Date