

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000011560

**Entity Name:** THE MERRITT CHARITABLE FUND INC.**Current Principal Place of Business:**400 ALTON ROAD, #3303  
MIAMI BEACH, FL 33139**Current Mailing Address:**400 ALTON ROAD, #3303  
MIAMI BEACH, FL 33139 US**FEI Number:** 82-3462210**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAW CENTER OF FLORIDA, INC.  
201 SOUTH BISCAYNE BOULEVARD, SUITE 800  
MIAMI, FL 33131 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/DIR
Name	MERRITT, TERESA
Address	400 ALTON ROAD, #3303
City-State-Zip:	MIAMI BEACH FL 33139

Title	VP/DIR
Name	SOLY, CHRISTIN
Address	4101 TAYLOR DRIVE
City-State-Zip:	FAIRFAX VA 22032

Title	T/DIR
Name	KLAASSEN, LINDSEY
Address	2250 CLARENDON BLVD., #1108
City-State-Zip:	ARLINGTON VA 22201

Title	DIR
Name	HAVERKAMP, MARTHA
Address	53 IRVING PLACE, APT. 6F
City-State-Zip:	NEW YORK NY 10003

Title	DIR/S
Name	KLAASSEN, DAVID M.
Address	9190 BARRICK STREET APT. 301
City-State-Zip:	FAIRFAX VA 22031

Title	DIR
Name	MERRITT, BARBARA JANE
Address	3003 SAYRE ROAD
City-State-Zip:	FAIRFAX VA 22031

*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:** TERESA MERRITT**PRESIDENT****02/02/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date