

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20618

Entity Name: VAN WEZEL FOUNDATION, INC.**Current Principal Place of Business:**777 N. TAMIAMI TRAIL
SARASOTA, FL 34236**Current Mailing Address:**777 N. TAMIAMI TRAIL
SARASOTA, FL 34236 US**FEI Number:** 59-2807055**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VAN BUSKIRK, MONICA MS.
777 N TAMIAMI TRAIL
SARASOTA, FL 34236 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:** MONICA VAN BUSKIRK

04/15/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PAST CHAIR
Name MARTELLA, MICHAEL MR.
Address 13210 PALMER'S CREEK TERRACE
City-State-Zip: SARASOTA FL 34202

Title VCHR
Name PHILIP, DELANEY MR.
Address 1411 KIMLIRA LANE
City-State-Zip: SARASOTA FL 34231

Title SECRETARY
Name NEWKIRK, KARL MR.
Address 1372 HARBOR DRIVE
City-State-Zip: SARASOTA FL 34239

Title CHAIRMAN
Name MERRIMAN, SHAUN MR.
Address 1100 S TAMIAMI TRAIL
City-State-Zip: SARASOTA FL 34236

Title PRES
Name VAN BUSKIRK, MONICA MS.
Address 409 PARTRIDGE CIRCLE
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name FAMIGLIO, MARK MR.
Address 1247 MANDALAY POINT DR.
City-State-Zip: LAKEWOOD RANCH FL 34242

Title TREASURER
Name BAHAJ, ALI
Address 777 N. TAMIAMI TRAIL
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name WILSON, MICHAEL
Address 200 SOUTH ORANGE AVE.
City-State-Zip: SARASOTA FL 34234

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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: MONICA VAN BUSKIRK

PRESIDENT & CEO

04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WEINER, SHARON
Address 4160 ROBERTS POINT CIRCLE
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name ARMOUR, MARYANN
Address 4449 BAY SHORE RD.
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name HALL, ANDREW
Address 3405 W. MARTIN LUTHER KING BLVD.
SUITE #3405
City-State-Zip: TAMPA FL 33607

Title DIRECTOR
Name LEWIS, JACQUELINE
Address 301 CONSTITUTION AVE. NE
City-State-Zip: WASHINGTON DC 20002

Title DIRECTOR
Name MCCLURE, ELAINE
Address 1241 GULF OF MEXICO DRIVE
#504
City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR
Name SMITH-ORTH, DELIA
Address 6523 VIRGINIA CROSSING
City-State-Zip: UNIVERSITY PARK FL 34201

Title DIRECTOR
Name RAPPAPORT, MARTIN
Address 1241 TREE BAY LANE
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name CUNEO, HERTA
Address 990 BLVD. OF THE ARTS
#601
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name HUNTLEY, DARRELL
Address 1703 KENILWORTH STREET
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name MARAMAN, DAVE
Address 2 NO. TAMiami TRAIL
SUITE 800
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name SCHLEICHER, JOEL
Address P.O. BOX 4273
City-State-Zip: SARASOTA FL 34230