2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21265

Entity Name: HEALTH FOUNDATION OF SOUTH FLORIDA, INC.

FILED
Mar 13, 2018
Secretary of State
CC9067406150

Current Principal Place of Business:

2 SOUTH BISCAYNE BLVD SUITE 1710 MIAMI, FL 33131

Current Mailing Address:

2 SOUTH BISCAYNE BLVD SUITE 1710 MIAMI, FL 33131 US

FEI Number: 65-0005384 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARCUS, STEVEN E 2 SOUTH BISCAYNE BLVD SUITE 1710 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: STEVEN E MARCUS 03/13/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title CFO

Name CHANT, LOREEN Name ANTIEAU, KATHY J

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title CHAIRMAN Title P

Name TRAN, THAO Name MARCUS, STEVEN E

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title VC Title DIRECTOR

Name WILSON, EVERETT Name GILMORE, KAREN

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

 Title
 DIRECTOR
 Title
 SECRETARY

 Name
 DICKINSON, BOB
 Name
 AKITI, MELIDA

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

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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: STEVEN E MARCUS PRESIDENT & CEO 03/13/2018

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name BREWSTER, LUTHER Name CASILLAS, JAVIER

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 DE LUCCA, MICHAEL
 Name
 FINE, CAROL

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title DIRECTOR Title DIRECTOR

Name STUMPHAUZER, RYAN Name HERNANDEZ, INES

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title DIRECTOR Title DIRECTOR

Name TERRELL, DOROTHY Name KING, RODERICK

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title DIRECTOR Title DIRECTOR

Name RONDA, BARBARA Name WONG, DIONNE

Address 2 SOUTH BISCAYNE BLVD Address 2 SOUTH BISCAYNE BLVD

SUITE 1710 SUITE 1710

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