

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N23672

Entity Name: JACKSON HEALTH FOUNDATION, INC.

Current Principal Place of Business:

1500 NW 12TH AVENUE
SUITE 1117 EAST
MIAMI, FL 33136

Current Mailing Address:

1500 NW 12TH AVENUE
SUITE 1117 EAST
MIAMI, FL 33136 US

FEI Number: 65-0077727

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TRIBBLE, KEITH R
1500 NW 12TH AVENUE
SUITE 1117 EAST
MIAMI, FL 33136 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 C
Name MOISE, RUDOLPH
Address 12947 EQUESTRIAN TRL
City-State-Zip: DAVIE FL 33330

Title T
Name JOYCE, EDWARD J
Address 1500 NW 12TH AVENUE
SUITE 1117 EAST
City-State-Zip: MIAMI FL 33136

Title S
Name COULSON, DAVID ESQ.
Address C/O GREENBERG TRAUIG 333 SE 2
AVE 44TH FL
City-State-Zip: MIAMI FL 33131

Title VC
Name VIYELLA, CANDIDO
Address 200 SOUTH BISCAYNE BLVD
51 FLOOR
City-State-Zip: MIAMI FL 33131

Title P & CEO
Name TRIBBLE, KEITH R
Address 1500 NW 12TH AVENUE
SUITE 1117 EAST
City-State-Zip: MIAMI FL 33136

Title COO
Name GATLIN, CHARMAINE
Address 16893 SW 50TH STREET
City-State-Zip: MIRAMAR FL 33027

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: CHARMAINE GATLIN

COO

05/22/2018

Electronic Signature of Signing Officer/Director Detail

Date