

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26154

**FILED**  
**Apr 05, 2024**  
**Secretary of State**  
**0103956067CC**

**Entity Name:** THE FUTERNICK FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

4200 BISCAYNE BLVD.  
MIAMI, FL 33137

**Current Mailing Address:**

4200 BISCAYNE BLVD.  
MIAMI, FL 33137 US

**FEI Number:** 65-0078657

**Certificate of Status Desired:** No

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

OKSANA, CARDINI  
4200 BISCAYNE BLVD.  
MIAMI, FL 33137 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:** OKSANA CARDINI

04/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name LIPOFF, NORMAN H  
Address 3 GROVE ISLE DRIVE, APT. 1009  
City-State-Zip: MIAMI FL 33133

Title DP  
Name FUTERNICK, MORRIS  
Address 2 GROVE ISLE DR APT 1509  
City-State-Zip: COCONUT GROVE FL

Title D  
Name NEWMAN, GAIL  
Address 9811 CHANTILLY POINT LANE  
City-State-Zip: LAKE WORTH FL 33467

Title DS  
Name FUTERNICK, CATHIE F  
Address 1650 FALL RIDGE ROAD, #101  
City-State-Zip: VAIL CO 81657

Title DVP  
Name FUTERNICK, MIKKI  
Address 2 GROVE ISLE DR. #1509  
City-State-Zip: MIAMI FL

Title D  
Name FUTERNICK, FRANK  
Address 3471 MAIN HIGHWAY, #1239  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name FUTERNICK, LEE  
Address 2929 MEDINAH  
City-State-Zip: WESTON FL 33332

Title D  
Name GERSON, GARY  
Address 4770 BISCAYNE BLVD., SUITE 400  
City-State-Zip: MIAMI FL 33137

**Continues on page 2**

*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:** SCOTT KAPLAN

**SECRETARY**

04/05/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name SOKOL, JERRY  
Address 437 N HIBISCUS DR.  
City-State-Zip: MIAMI BEACH FL 33139

Title D  
Name SCOTT, KAPLAN  
Address 4200 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33137

Title D  
Name HIRT, FRED  
Address 20155 NE 38TH CT., APT. 703  
City-State-Zip: AVENTURA FL 33180

Title D  
Name SKLAWER, ANDY  
Address 1600 LINDEN AVENUE  
City-State-Zip: BOULDER CO 80304

Title D  
Name SOLOMON, JACOB  
Address 4200 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33137

Title D  
Name FUTERNICK, JEFF  
Address 1656 DIPLOMAT DRIVE  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title D  
Name SCHWARTZ, DAVID  
Address 1652 VICTORIA POINTE LANE  
City-State-Zip: WESTON FL 33327