

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33342

Entity Name: SOUTH FLORIDA ALA CHARITY FUND INCORPORATED

Current Principal Place of Business:

C/O GORDON & REES - KRISTINE BLANCO
100 SE SECOND STREET SUITE 3900
MIAMI, FL 33131

Current Mailing Address:

C/O GORDON & REES. - KRISTINE BLANCO, T
100 SE SECOND STREET SUITE 3900
MIAMI, FL 33131 US

FEI Number: 65-0145698

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BLANCO, KRISTINE
100 SE 2ND STREET
SUITE 3900
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: KRISTINE BLANCO

04/04/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BLANCO, KRISTINE
Address 100 SE 2ND STREET
 SUITE 3900
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name TORRES, LILLIANA
Address 200 SOUTH BISCAYNE BLVD
 SUITE 2500
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name WEIR, EMELYN
Address 200 SOUTH BISCAYNE BLVD
 SUITE 5300
City-State-Zip: MIAMI FL 33131

Title PRESIDENT
Name SANDERS, LOURDES
Address 2 SOUTH BISCAYNE BLVD
 21ST FLOOR
City-State-Zip: MIAMI FL 33131

Title PRESIDENT-ELECT
Name LISCHNER, JANETTE
Address 701 BRICKELL AVE, 17TH FLOOR
City-State-Zip: MIAMI FL 33131

Title SECRETARY
Name ACOSTA, REGNIER
Address 1 SE 3RD AVENUE
 1700
City-State-Zip: MIAMI FL 33131

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: KRISTINE BLANCO

TREASURER

04/04/2023

Electronic Signature of Signing Officer/Director Detail

Date