2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003330

Entity Name: CHAPMAN PARTNERSHIP, INC.

Current Principal Place of Business:

1550 N. MIAMI AVE. MIAMI. FL 33136

Current Mailing Address:

1550 N. MIAMI AVE. MIAMI, FL 33136 US

FEI Number: 65-0425069 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VINCENT, H. DANIEL 1550 N MIAMI AVE 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

FILED Jan 26, 2016

Secretary of State

CC2015017343

Officer/Director Detail:

Title CHAIR EMERITUS Title TD

Name BELL, TRISH Name HUSTON, JR., TOM

Address 457 LEUCADENDRA DRIVE Address 1121 MADRUGA AVENUE
City-State-Zip: CORAL GABLES FL 33156 City-State-Zip: CORAL GABLES FL 33146

Title SD Title D

Name CRABTREE, BONNIE M Name ERBAN, TOMAS

Address 1450 BRICKELL AVENUE, SUITE 2610 Address 604 MALAGA AVENUE

City-State-Zip: MIAMI FL 33131 City-State-Zip: CORAL GABLES FL 33134

Title D Title DCC

Name BESTMAN, EVALINA DR. Name HOWE, OSMOND CJR.

Address 1313 NW 36 STREET, SUITE 400 Address 2000 TOWERSIDE TERR., SUITE 402

City-State-Zip: MIAMI FL 33142 City-State-Zip: MIAMI FL 33138

Title PRESIDENT/CEO Title CHAIRMAN

Name VINCENT, H. DANIEL Name FERNANDEZ-GUZMAN, CARLOS

Address 1550 NORTH MIAMI AVENUE Address 1390 BRICKELL AVENUE

City-State-Zip: MIAMI FL 33136 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: H. DANIEL VINCENT

PRESIDENT

01/26/2016

Electronic Signature of Signing Officer/Director Detail

Date