

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002993

Entity Name: BBX CAPITAL FOUNDATION, INC.**Current Principal Place of Business:**401 EAST LAS OLAS BLVD
SUITE 800
FORT LAUDERDALE, FL 33301**Current Mailing Address:**401 EAST LAS OLAS BLVD
SUITE 800
FORT LAUDERDALE, FL 33301 US**FEI Number:** 65-0499150**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LINNICK, STAN
401 EAST LAS OLAS BLVD
SUITE 800
FORT LAUDERDALE, FL 33301 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	PRESIDENT, TRUSTEE
Name	LEVAN, ALAN B
Address	401 EAST LAS OLAS BLVD SUITE 800
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	SECRETARY
Name	MARINO, LOIS
Address	401 EAST LAS OLAS BLVD SUITE 800
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	TRUSTEE
Name	BARRY-SMITH, MARCIA
Address	401 EAST LAS OLAS BLVD SUITE 800
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	TRUSTEE, TREASURER
Name	LEVAN, JARETT
Address	401 EAST LAS OLAS BLVD SUITE 800
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	TRUSTEE
Name	WISE, SETH M
Address	401 EAST LAS OLAS BLVD SUITE 800
City-State-Zip:	FORT LAUDERDALE FL 33301

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: MARCIA BARRY-SMITH

TRUSTEE

02/22/2013

Electronic Signature of Signing Officer/Director Detail_____
Date