

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N94000002993

Entity Name: BBX CAPITAL FOUNDATION, INC.

Current Principal Place of Business:

201 EAST LAS OLAS BLVD
SUITE 1900
FORT LAUDERDALE, FL 33301

Current Mailing Address:

PO BOX 39000
SUITE 800
FORT LAUDERDALE, FL 39000-9000 US

FEI Number: 65-0499150

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEARNS WEAVER MILLER, PA
150 WEST FLAGLER STREET
SUITE 2200
MIAMI, FL 33130 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: ALLISON MILLER

09/27/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, TRUSTEE
Name LEVAN, ALAN B
Address PO BOX 39000
 SUITE 800
City-State-Zip: FORT LAUDERDALE FL 39000-9000

Title TRUSTEE, TREASURER
Name LEVAN, JARETT
Address PO BOX 39000
 SUITE 800
City-State-Zip: FORT LAUDERDALE FL 39000-9000

Title TRUSTEE
Name ABDO, JACK
Address 201 EAST LAS OLAS BLVD
 SUITE 1900
City-State-Zip: FORT LAUDERDALE FL 33301

Title SECRETARY, DIRECTOR
Name MARINO, LOIS
Address PO BOX 39000
 SUITE 800
City-State-Zip: FORT LAUDERDALE FL 39000-9000

Title TRUSTEE
Name WISE, SETH M
Address PO BOX 39000
 SUITE 800
City-State-Zip: FORT LAUDERDALE FL 39000-9000

Title TRUSTEE
Name BARRY-SMITH, MARCIA
Address 201 EAST LAS OLAS BLVD
 SUITE 1900
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: LOIS MARINO

DIRECTOR

09/27/2021

Electronic Signature of Signing Officer/Director Detail

Date