

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006197

Entity Name: THE MICHAEL AND LOUISA VON CLEMM FOUNDATION, INC.**Current Principal Place of Business:**200 S BISCAYNE BLVD #5300
MIAMI, FL 33131-2339**Current Mailing Address:**200 S BISCAYNE BLVD #5300
MIAMI, FL 33131-2339**FEI Number:** 65-0541059**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, ETHAN W
200 S BISCAYNE BLVD
MORGAN LEWIS & BOCKIUS, #5300
MIAMI, FL 33131-2339 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	PD
Name	VON CLEMM, LOUISA
Address	2 DRAYSON MEWS
City-State-Zip:	LONDON

Title	TD
Name	VON CLEMM, STEFANIE C
Address	NO 2 DRAYSON MEWS
City-State-Zip:	LONDON

Title	SD
Name	JOHNSON, ETHAN W
Address	630 CAMPANA AVE
City-State-Zip:	CORAL GABLES FL

Title	D
Name	RIGHTER, JAMES V
Address	58 WINTER ST
City-State-Zip:	BOSTON MA 02108

Title	D
Name	ISELIN, CHARLOTTE
Address	11B SHEFFIELD TERR
City-State-Zip:	LONDON

Title	D
Name	MCN. RIGHTER, BREWSTER A
Address	760 CHICKEN VALLEY RD
City-State-Zip:	LOCUST VALLEY NY 11560

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: ETHAN W. JOHNSON**ATTORNEY****04/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date