

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000002838

**FILED**  
**Jan 07, 2014**  
**Secretary of State**  
**CC4165265094**

**Entity Name:** CLARENCE WOLF JR. AND ALMA B. WOLF FOUNDATION, INC.

**Current Principal Place of Business:**

169 E FLAGLER ST STE 800  
MIAMI, FL 33131-1296

**Current Mailing Address:**

169 E FLAGLER ST STE 800  
MIAMI, FL 33131-1296 US

**FEI Number:** 65-0920365

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KWAL, RICHARD M  
169 E FLAGLER ST STE 800  
MIAMI, FL 33131-1296 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 D  
Name KWAL, RICHARD M  
Address 169 E FLAGLER ST STE 800  
City-State-Zip: MIAMI FL 33131-1296

Title D  
Name RUBIN, GAIL DR.  
Address 169 E FLAGLER ST STE 800  
City-State-Zip: MIAMI FL 33131-1296

Title D  
Name KWAL, RACHEL A  
Address 169 E FLAGLER ST STE 800  
City-State-Zip: MIAMI FL 33131-1296

Title D  
Name KWAL, JACLYN M  
Address 169 E FLAGLER ST STE 800  
City-State-Zip: MIAMI FL 33131-1296

*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:** RICHARD M KWAL

**PRES**

**01/07/2014**

Electronic Signature of Signing Officer/Director Detail

Date