

**2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000002862

**Entity Name:** JOHN W. HENRY FAMILY FOUNDATION, INC.

**FILED**  
**Apr 14, 2017**  
**Secretary of State**  
**CC5386787707**

**Current Principal Place of Business:**

433 PLAZA REAL SUITE # 365  
BOCA RATON, FL 33432

**Current Mailing Address:**

433 PLAZA REAL SUITE # 365  
BOCA RATON, FL 33432 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND  
PLANTATION, FL 33324 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 DIRECTOR  
Name PIZZUTI HENRY, LINDA  
Address 433 PLAZA REAL SUITE # 365  
City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR  
Name VENA, CHARLOTTE  
Address 433 PLAZA REAL SUITE # 365  
City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR  
Name GINSBERG, DAVID  
Address 433 PLAZA REAL SUITE # 365  
City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR  
Name HENRY, JOHN W.  
Address 433 PLAZA REAL SUITE # 365  
City-State-Zip: BOCA RATON FL 33432

Title SECRETARY  
Name TWIST, EDWIN  
Address 433 PLAZA REAL SUITE # 365  
City-State-Zip: BOCA RATON FL 33432

Title PRESIDENT  
Name HENRY, JOHN W.  
Address 433 PLAZA REAL SUITE # 365  
City-State-Zip: BOCA RATON FL 33432

*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: JOHN W. HENRY**

**PRESIDENT**

**04/14/2017**

Electronic Signature of Signing Officer/Director Detail

Date