## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000009381

FILED Jan 11, 2010 Secretary of State

Entity Name: THE JWK MENTORING FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O JOHN W. KOZYAK 2525 PONCE DE LEON BLVD., 9TH FLOOR CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

C/O JOHN W. KOZYAK 2525 PONCE DE LEON BLVD., 9TH FLOOR CORAL GABLES, FL 33134

FEI Number: 42-1713041 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WILLIAMS-BRINGHURST, BRENDA 2525 PONCE DE LEON BOULEVARD 9TH FLOOR MIAMI, FL 33134 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

**OFFICERS AND DIRECTORS:** 

Title: D

Name: KOZYAK, JOHN W

Address: 2525 PONCE DE LEON BLVD., 9TH FLOOR

City-St-Zip: CORAL GABLES, FL 33134

Title: D

Name: LOPEZ-CASTRO, CORALI

Address: 2525 PONCE DE LEON BLVD., 9TH FLOOR

City-St-Zip: CORAL GABLES, FL 33134

Title: D

Name: SHAW-WILDER, DETRA P

Address: 2525 PONCE DE LEON BLVD., 9TH FLOOR

City-St-Zip: CORAL GABLES, FL 33134

Title: D

Name: COX, MARCY

Address: 1311 MILLER DRIVE, ROOM 112 City-St-Zip: CORAL GABLES, FL 33146

Title:

Name: SILVERMAN, BARBARA

Address: 255 ARAGON AVENUE, 2ND FLOOR City-St-Zip: CORAL GABLES, FL 33134

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: DETRA P. SHAW-WILDER D 01/11/2010