2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2012
Secretary of State

DOCUMENT# N07000008006

Entity Name: QUINT FAMILY FOUNDATION, INC.

Current Principal Place of Business:

4425 PONCE DE LEON BLVD., 4TH FLOOR
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4425 PONCE DE LEON BLVD., 4TH FLOOR
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 26-0714439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOMINAC, EVE
4425 PONCE DE LEON BLVD., STE. 500
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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: QUINT, DAVID
Address: 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: D
Name: QUINT, SHEILA
Address: 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: D
Name: QUINT, GEORGE
Address: 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: D
Name: QUINT, JANINE
Address: 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: D
Name: LOMINAC, EVE J
Address: 4425 PONCE DE LEON BLVD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

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: DAVID QUINT D 04/10/2012

Electronic Signature of Signing Officer or Director — Date