

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702306

Entity Name: DR. JOHN T. MACDONALD FOUNDATION, INC.

Current Principal Place of Business:

1550 MADRUGA AVE
SUITE 215
CORAL GABLES, FL 33146

Current Mailing Address:

1550 MADRUGA AVE
SUITE 215
CORAL GABLES, FL 33146 US

FEI Number: 59-0818918

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BREIER, ROBERT G., ESQUIRE
2800 PONCE DE LEON BLVD
STE 1125
CORAL GABLES, 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

Officer/Director Detail :

Title SECRETARY
Name PABALAN, STEVEN S
Address 5975 SUNSET DRIVE
City-State-Zip: SOUTH MIAMI FL 33143

Title CHAIRMAN
Name MARK, THOMAS M
Address 8225 SW 60 COURT
City-State-Zip: SOUTH MIAMI FL 33143

Title VC
Name ROLLER, DEAN
Address 4685 PONCE DE LEON BLVD.
SUITE 201
City-State-Zip: CORAL GABLES FL 33146

Title ED
Name GREENE, KIM
Address 1550 MADRUGA AVENUE, SUITE 215
City-State-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: KIM GREENE

EXECUTIVE DIRECTOR

02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date