

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 731483

**FILED**  
**Jan 30, 2023**  
**Secretary of State**  
**5517199562CC**

**Entity Name:** NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' SERVICES, INC.

**Current Principal Place of Business:**

620 N.E. 127 STREET  
NORTH MIAMI, FL 33161

**Current Mailing Address:**

620 N.E. 127 STREET  
NORTH MIAMI, FL 33161 US

**FEI Number:** 59-1582766

**Certificate of Status Desired:** No

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

COOK, BOB EX. DIR  
620 N.E. 127 STREET  
NORTH MIAMI, FL 33161 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:** BOB W COOK

01/30/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title BOARD MEMBER  
Name KEYS, CAROL F  
Address CITY OF NORTH MIAMI  
776 NE 125TH STREET  
City-State-Zip: NORTH MIAMI FL 33161

Title VP  
Name COBO, BLANCA M  
Address 590 NW 126 STREET  
City-State-Zip: NORTH MIAMI FL 33168

Title SECRETARY, DIRECTOR  
Name MERKE, CLARENCE  
Address 905 NW 133 STREET  
City-State-Zip: NORTH MIAMI FL 33168

Title PRESIDENT, DIRECTOR  
Name MCDEARMAID, MICHAEL  
Address 840 NE 127 STREET  
City-State-Zip: NORTH MIAMI FL 33161

Title DIRECTOR  
Name BLYNN, ESTHER T  
Address 11900 BISCAYNE BLVD.  
269  
City-State-Zip: NORTH MIAMI FL 33181

Title DIRECTOR  
Name ESTIME-IRVIN, MARY C  
Address 155 NE 131 STREET  
City-State-Zip: NORTH MIAMI FL 33161

Title DIRECTOR  
Name STAHL, MICHAEL  
Address 19333 COLLINS AVENUE  
1506  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title DIRECTOR  
Name JURIGA, LARRY  
Address NORTH MIAMI POLICE DEPARTMENT  
700 NE 124TH STREET  
City-State-Zip: NORTH MIAMI FL 33161

**Continues on page 2**

*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:** BOB W COOK

**EXECUTIVE DIRECTOR**

01/30/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title EXECUTIVE DIRECTOR  
Name COOK, BOB W  
Address 1732 NE 16TH AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33305

Title DIRECTOR  
Name MCDEVITT, SARA  
Address 14490 NE 10 AVENUE  
City-State-Zip: NORTH MIAMI FL 33161

Title DIRECTOR  
Name BRICENO, MARIA  
Address 1680 NE 137 TERRACE  
City-State-Zip: NORTH MIAMI FL 33181

Title DIRECTOR  
Name HICKS , DAWN  
Address 105 LAKE EMERALD DRIVE  
APT. 308  
City-State-Zip: OAKLAND PARK FL 33309