

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000520

Entity Name: MOURNING FAMILY FOUNDATION, INC.

Current Principal Place of Business:

450 NW 14 STREET
MIAMI, FL 33136

FILED
Jan 16, 2024
Secretary of State
1544850677CC

Current Mailing Address:

450 NW 14 STREET
MIAMI, FL 33136 US

FEI Number: 65-1075983

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOURNING FAMILY FOUNDATION
100 S BISCAYNE BLVD
SUITE 300
MIAMI, FL 33131 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: CARLTON BECKFORD

01/16/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name MOURNING, ALONZO H.
Address 100 S BISCAYNE BLVD
SUITE 300
City-State-Zip: MIAMI FL 33131

Title T
Name FURST, ALLEN
Address 100 S BISCAYNE BLVD
SUITE 300
City-State-Zip: MIAMI FL 33131

Title CEO
Name BROWN, TINA
Address 100 S BISCAYNE BLVD
SUITE 300
City-State-Zip: MIAMI FL 33131

Title VICE CHAIR
Name FEBRES, MICHELLE
Address 7705 NW 48TH STREET
SUITE 100
City-State-Zip: DORAL FL 33166

Title SECRETARY
Name ASION, ANDRES
Address 41 SE 5TH STREET
SUITE CU-1
City-State-Zip: MIAMI FL 33131

Title D
Name DOTSON, ALBERT
Address 1450 BRICKELL AVENUE
23RD FLOOR
City-State-Zip: MIAMI FL 33131

Title CHAIRMAN
Name MARINO, STEPHEN A
Address 100 SE 2ND STREET
30TH FLOOR
City-State-Zip: MIAMI FL 33131

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: TINA BROWN

CEO

01/16/2024

Electronic Signature of Signing Officer/Director Detail

Date