#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000645

Entity Name: FLORIDA HEART RESEARCH FOUNDATION, INC.

FILED Apr 09, 2024 Secretary of State 8859379142CC

## **Current Principal Place of Business:**

4770 BISCAYNE BLVD SUITE 500

MIAMI, FL 33137

### **Current Mailing Address:**

4770 BISCAYNE BLVD SUITE 500 MIAMI, FL 33137 US

FEI Number: 51-0474502 Certificate of Status Desired: No

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

CAVALIE, NANCY 4770 BISCAYNE BLVD SUITE 500 MIAMI, FL 33137 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: NANCY CAVALIE 04/09/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN Title VC

Name BATCHELLER, JOE ANN Name ADAMS, JOSE A MD

Address 4770 BISCAYNE BLVD, SUITE 500 Address 4770 BISCAYNE BLVD, SUITE 500

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137

Title DIRECTOR Title DIRECTOR

Name DI PIETRO, OLIVER R MD Name MELLA, MARY JEAN CATINCHI ESQ.

Address 4770 BISCAYNE BLVD, SUITE 500 Address 4770 BISCAYNE BLVD, SUITE 500

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137

Title ASST. TREASURER Title DIRECTOR

Name CAVALIE, NANCY R Name HUMPHREY, TRACY TOWLE

Address 4770 BISCAYNE BLVD, SUITE 500 Address 4770 BISCAYNE BLVD, SUITE 500

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137

Title SECRETARY Title DIRECTOR

Name WHALEN, ELIZABETH Name CANOSSA-TERRIS, MARIA MD
Address 4770 BISCAYNE BLVD, SUITE 500 Address 4770 BISCAYNE BLVD, SUITE 500

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137

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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: NANCY R CAVALIE EXECUTIVE DIRECTOR 04/09/2024

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title TREASURER Title DIRECTOR

Name PORTER, CHARLES E Name FALKENBERG, ERIC

Address 4770 BISCAYNE BLVD SUITE 500 Address 4770 BISCAYNE BLVD SUITE 500

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