

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000009630

**Entity Name:** ROBERT ARTHUR SEGALL FAMILY FOUNDATION, INC.

**FILED**  
**Mar 24, 2015**  
**Secretary of State**  
**CC0746348668**

**Current Principal Place of Business:**

28 WEST FLAGLER STREET 11TH FLOOR  
COURTHOUSE PLAZA  
MIAMI, FL 33130-1896

**Current Mailing Address:**

28 WEST FLAGLER STREET 11TH FLOOR  
COURTHOUSE PLAZA  
MIAMI, FL 33130-1896 US

**FEI Number:** 20-1720473

**Certificate of Status Desired:** Yes

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

BLOOM, KENNETH M  
28 WEST FLAGLER STREET 11TH FLOOR  
COURTHOUSE PLAZA  
MIAMI, FL 33130-1896 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 P  
Name SCHILLER, SHIRLEE  
Address VI AT AVENTURA  
19333 WEST COUNTRY CLUB DRIVE  
APT. 2222  
City-State-Zip: AVENTURA FL 33180

Title D  
Name KRAMER, JAMES I.  
Address 9200 SOUTH DADELAND BOULEVARD  
SUITE 320  
City-State-Zip: MIAMI FL 33156

Title S  
Name BLOOM, KENNETH M  
Address 28 WEST FLAGLER STREET 11TH  
FLOOR  
COURTHOUSE PLAZA  
City-State-Zip: MIAMI FL 33130-1896

*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:** KENNETH M. BLOOM

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03/24/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date