

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08867

Entity Name: MARJORY STONEMAN DOUGLAS BISCAYNE NATURE CENTER, INC.**Current Principal Place of Business:**6767 CRANDON BLVD
KEY BISCAYNE, FL 33149**Current Mailing Address:**6767 CRANDON BLVD
KEY BISCAYNE, FL 33149 US**FEI Number:** 59-2549600**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GARCIA-SERRA, MARIO
600 BRICKELL AVENUE
SUITE 3500
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:** MARIO GARCIA-SERRA

02/12/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name ALLISON, JUDITH SAYLOR
Address 1440 SHORE ROAD
City-State-Zip: LINWOOD NJ 08330

Title T
Name STEVEN, HENRIQUEZ
Address 6767 CRANDON BLVD.
City-State-Zip: KEY BISCAYNE FL 33149

Title ED
Name LONG, THEODORA
Address 6767 CRANDON BLVD
City-State-Zip: KEY BISCAYNE FL 33149

Title VP
Name SORKIN , STEVE
Address 4721 UNIVERSITY DRIVE
City-State-Zip: CORAL GABLES FL 33146

Title PRESIDENT
Name ARMENDARIZ, LESLIE
Address 3301 RICKENBACKER CSWY
City-State-Zip: KEY BISCAYNE FL 33149

Title D
Name JACQUELINE, GOPIE
Address 721 SISTINA AVE
City-State-Zip: CORAL GABLES FL 33146

Title D
Name BRETT, GRAFF
Address 765 CRANDON BLVD
City-State-Zip: KEY BISCAYNE FL 33149

Title D
Name GARCIA-SERRA, MARIO
Address 600 BRICKELL AVENUE
SUITE 3500
City-State-Zip: MIAMI FL 33131

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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: THEODORA LONG

EXECUTIVE DIRECTOR

02/12/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name TILGHMAN, JAMES
Address ONE SE 3RD AVENUE
SUITE 3000
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name CAPLAN, FRANKLIN
Address 347 PALMWOOD LANE
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR
Name BINELO , CLAUDIA
Address 1561 AGUA AVENUE
City-State-Zip: CORAL GABLES FL 33156