

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000010591

**Entity Name:** LILLIAN & LUIS FERNANDEZ FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

ONE N CLEMATIS ST STE 200  
W PALM BEACH, FL 33401

**Current Mailing Address:**

ONE N CLEMATIS ST STE 200  
W PALM BEACH, FL 33401 US

**FEI Number:** 27-4012727

**Certificate of Status Desired:** No

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

FERNANDEZ, LUIS J  
ONE N CLEMATIS ST STE 200  
W PALM BEACH, FL 33401 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           PTD  
Name           FERNANDEZ, LUIS J  
Address        ONE N CLEMATIS ST STE 200  
City-State-Zip: W PALM BEACH FL 33401

Title           VSD  
Name           FERNANDEZ, LILLIAN F  
Address        ONE N CLEMATIS ST STE 200  
City-State-Zip: W PALM BEACH FL 33401

Title           D  
Name           FERNANDEZ, LUIS A  
Address        ONE N CLEMATIS ST STE 200  
City-State-Zip: W PALM BEACH FL 33401

Title           D  
Name           FERNANDEZ, ALFONSO G  
Address        ONE N CLEMATIS ST STE 200  
City-State-Zip: W PALM BEACH FL 33401

*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:** LUIS J. FERNANDEZ

**PRESIDENT**

**02/21/2017**

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

\_\_\_\_\_  
Date