

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000006388

Entity Name: MARK & KATHRYN FORD FAMILY FOUNDATION, INC.**Current Principal Place of Business:**235 N.E. 4TH AVENUE
SUITE 101
DELRAY BEACH, FL 33483**Current Mailing Address:**235 N.E. 4TH AVENUE
SUITE 101
DELRAY BEACH, FL 33483**FEI Number:** 46-3841170**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOO, GIOVANNA
235 NE 4TH AVENUE
SUITE 101
DELRAY BEACH, FL 33483 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:** GIOVANNA KOO

02/06/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	AUTHORIZED MEMBER
Name	FORD, MARK M
Address	235 N.E. 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

Title	AUTHORIZED MEMBER
Name	FORD, KATHRYN
Address	235 N.E. 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

Title	AUTHORIZED MEMBER
Name	FORD, MICHAEL
Address	235 N.E. 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

Title	AUTHORIZED MEMBER
Name	FORD, LIAM
Address	235 N.E. 4TH AVENUE SUITE 101
City-State-Zip:	DELRAY BEACH FL 33483

Title	AUTHORIZED MEMBER
Name	FORD, PATRICK
Address	235 N.E. 4TH AVENUE SUITE 101
City-State-Zip:	DELRAY BEACH FL 33483

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: MARK FORD**MEMBER**

02/06/2019

Electronic Signature of Signing Officer/Director Detail

Date