

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 15, 2015
Secretary of State
CC9886360751

Entity Name: HAROLD & MURIEL BERKMAN CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

3900 NEWHAVEN LAKE DRIVE
WELLINGTON, FL 33449-8043

Current Mailing Address:

3900 NEWHAVEN LAKE DRIVE
WELLINGTON, FL 33449-8043

FEI Number: 46-5520735

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHRISTIN, NICHOLAS E
2800 PONCE DE LEON BLVD, STE 800
CORAL GABLES, FL 33134 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 D
Name BERKMAN, HAROLD W PH.D
Address 3900 NEWHAVEN LAKE DRIVE
City-State-Zip: WELLINGTON FL 33449-8043

Title D
Name BERKMAN, MURIEL
Address 3900 NEWHAVEN LAKE DRIVE
City-State-Zip: WELLINGTON FL 33449-8043

Title D
Name BERKMAN, KAREN A PH.D
Address 3900 NEWHAVEN LAKE DRIVE
City-State-Zip: WELLINGTON FL 33449-8043

Title D
Name MARTINEZ-MALO, MARTHA
Address 201 ALHAMBRA CIRCLE, 14TH FL
City-State-Zip: CORAL GABLES FL 33134

Title VPD
Name BERRY, STUART
Address 201 ALHAMBRA CIRCLE, 14TH FL
City-State-Zip: CORAL GABLES FL 33134

Title D
Name BABBIN, BARRY J PH.D.
Address HEAD OF DEPT. OF MARKETING AND ANALYSIS
City-State-Zip: RUSTON LA 71272

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: HAROLD W. BERKMAN, PH.D

DIRECTOR

04/15/2015

Electronic Signature of Signing Officer/Director Detail

Date