

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000002003

Entity Name: THE CORAL GABLES FORUM, INC.**Current Principal Place of Business:**9100 SCHOOL HOUSE ROAD
CORAL GABLES, FL 33156**Current Mailing Address:**9100 SCHOOL HOUSE ROAD
CORAL GABLES, FL 33156 US**FEI Number:** 46-4978916**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRAWNER, PHILIP L
9100 SCHOOL HOUSE ROAD
CORAL GABLES, FL 33156 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	DOWLEN, LON
Address	4700 UNIVERSITY DRIVE
City-State-Zip:	CORAL GABLES FL 33146

Title	TREASURER
Name	BRAWNER, PHILIP L
Address	9100 SCHOOL HOUSE ROAD
City-State-Zip:	CORAL GABLES FL 33156

Title	D
Name	EBSARY, RICHARD
Address	950 ANDORA AVENUE
City-State-Zip:	CORAL GABLES FL 33146

Title	D
Name	SABIA, LOU
Address	1260 MANDAVIA AVENUE
City-State-Zip:	CORAL GABLES FL 33146

Title	VP
Name	BRIEANT, VICTORIA E
Address	1118 FERDINAND STREET
City-State-Zip:	CORAL GABLES FL 33134

Title	PRESIDENT
Name	LANGER, LESTER
Address	446 MAJORCA AVE.
City-State-Zip:	CORAL GABLES FL 33134

Title	SECRETARY
Name	THORMAN, STEPHANIE
Address	12535 MOSS RANCH ROAD
City-State-Zip:	MIAMI FL 33156

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: PHILIP L. BRAWNER**TREASURER****04/29/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date