

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000010819

**Entity Name:** FLORIDA POLICY INSTITUTE, INC.

**Current Principal Place of Business:**

1211 NORTH WESTSHORE BLVD.  
SUITE 314  
TAMPA, FL 33607

**Current Mailing Address:**

4243 LENNOX DRIVE  
MIAMI, FL 33133 US

**FEI Number:** 20-1328734

**Certificate of Status Desired:** No

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

BIEMESDERFER, DAVID  
1211 NORTH WESTSHORE BLVD.  
SUITE 314  
TAMPA, FL 33607 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            SEC.  
Name            BARANCIK, SCOTT  
Address        245 26TH AVENUE N  
City-State-Zip: ST. PETERSBURGH FL 33704

Title            TR.  
Name            EAVEY, MIREYA  
Address        7131 PROFESSIONAL PARKWAY  
                  EAST  
City-State-Zip: SARASOTA FL 34240

Title            PRES  
Name            RODRIQUEZ, MARIA  
Address        2800 BISCAYNE BLVD. - SUITE 800  
City-State-Zip: MIAMI FL 33137

*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:** MARIA RODRIQUEZ

**PRESIDENT**

**01/12/2015**

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

\_\_\_\_\_  
Date