

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000000967

**Entity Name:** THE THOMAS G. TERCILLA NEUROLOGICAL RESEARCH FOUNDATION, INC.

**FILED**  
**Jun 30, 2020**  
**Secretary of State**  
**0289557720CC**

**Current Principal Place of Business:**

1425 PALANCIA AVENUE  
CORAL GABLES, FL 33146

**Current Mailing Address:**

1425 PALANCIA AVENUE  
CORAL GABLES, FL 33146 US

**FEI Number: 00-1439540**

**Certificate of Status Desired: No**

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

BARRETO TERCILLA, MAGGIE  
1425 PALANCIA AVENUE  
CORAL GABLES, FL 33146 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:** MAGGIE BARRETO TERCILLA

06/30/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DO	Title	DO
Name	DAVIDSON, PETER	Name	FERNANDEZ, ANDRES C
Address	6468 SW 37TH STREET	Address	6770 SW 74TH STREET
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	SOUTH MIAMI FL 33143
Title	D	Title	D
Name	TERCILLA, MAGGIE BARRETO	Name	TERCILLA, ORLANDO
Address	1425 PALANCIA AVENUE	Address	1425 PALANCIA AVENUE
City-State-Zip:	MIAMI FL 33146	City-State-Zip:	MIAMI FL 33146
Title	DO		
Name	TERCILLA, VICTORIA		
Address	1425 PALANCIA AVENUE		
City-State-Zip:	MIAMI FL 33146		

*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:** MAGGIE BARRETO TERCILLA

**DIRECTOR**

06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date