

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47502

Entity Name: THE KISLAK FAMILY FOUNDATION, INC.**Current Principal Place of Business:**7900 MIAMI LAKES DRIVE WEST
SUITE 300
MIAMI LAKES, FL 33016**Current Mailing Address:**7900 MIAMI LAKES DRIVE WEST
SUITE 300
MIAMI LAKES, FL 33016 US**FEI Number:** 65-0350930**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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	DIRECTOR, VP
Name	KISLAK, PHILIP T
Address	5180 NORTH SOLDIER TRAIL
City-State-Zip:	TUCSON AZ 85747

Title	DIRECTOR, CEO, TREASURER
Name	BARTELMO, THOMAS
Address	7900 MIAMI LAKES DR. WEST SUITE 300
City-State-Zip:	MIAMI LAKES FL 33016

Title	DIRECTOR (CHAIRMAN), PRESIDENT
Name	KISLAK, PAULA A
Address	545 HODGES LANE
City-State-Zip:	SANTA BARBARA CA 93108

Title	SECRETARY
Name	ASENCIO, ALICIA
Address	7900 MIAMI LAKES DRIVE WEST
City-State-Zip:	MIAMI LAKES FL 33016

Title	DIRECTOR
Name	LOMBARDI, JOHN
Address	7900 MIAMI LAKES DRIVE WEST
City-State-Zip:	MIAMI LAKES FL 33016

Title	VP
Name	LUBOW, CHERYL
Address	7900 MIAMI LAKES DRIVE WEST
City-State-Zip:	MIAMI LAKES FL 33016

Title	VP
Name	QUERALT, CONCEPCION 'CONNIE'
Address	7900 MIAMI LAKES DRIVE WEST
City-State-Zip:	MIAMI LAKES FL 33016

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: CHERYL A LUBOW

VICE PRESIDENT

01/23/2023

Electronic Signature of Signing Officer/Director Detail_____
Date