## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003396

Entity Name: VERA CASH FOUNDATION, INC.

**Current Principal Place of Business:** 

4627 PONCE DE LEON BLVD. CORAL GABLES. FL 33146

**Current Mailing Address:** 

4627 PONCE DE LEON BLVD. CORAL GABLES. FL 33146

FEI Number: 31-1542883 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVEN C WITTMER 4627 PONCE DE LEON BLVD. 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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 29, 2015

**Secretary of State** 

CC0177681483

Officer/Director Detail:

Title CHPD Title DT

WITTMER, STEVEN C Name SURIOL, LYNN W Name

4627 PONCE DE LEON BLVD. Address 6880 SW 44 ST UNIT 100 Address

City-State-Zip: MIAMI FL 33155 CORAL GABLES FL 33146 City-State-Zip:

Title DS Title DV

Name WITTMER, JOAN Name MARSHALL, KATHERINE

Address 4627 PONCE DE LEON BLVD. Address 4627 PONCE DE LEON BLVD. CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

City-State-Zip:

Title VD

WITTMER. STEVEN T Name

Address 2014 4TH ST

City-State-Zip: SARASOTA FL 34237

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: STEVEN C WITTMER

Electronic Signature of Signing Officer/Director Detail

**CHPD** 

04/29/2015

Date