## 2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007748

Entity Name: GUILD FAMILY FOUNDATION, INC.

**Current Principal Place of Business:** 

4207 SW HIGH MEADOWS AVE PALM CITY. FL 34990

## **Current Mailing Address:**

C/O MEDIA FINANCIAL SERVICES
1655 PALM BEACH LAKES BLVD SUITE 903
WEST PALM BEACH. FL 33401 US

FEI Number: 13-4045657 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MCENTEE, DANIEL F 4207 SW HIGH MEADOWS AVE PALM CITY, FL 34990 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 22, 2021

**Secretary of State** 

5372079835CC

Officer/Director Detail:

Title PD Title VD

NameGUILD, ADAMNameBROWN, LYNNAddress1101 WALLACE RIDGEAddress83 STURGES HWY

City-State-Zip: BEVERLY HILLS CA 90210 City-State-Zip: WESTPORT CT 06880

Title STD Title C

Name GUILD, MARC Name GUILD, RALPH

Address 50 SAGAMORE RD Address 622 N. FLAGLER DRIVE

APT 5A APT 201

City-State-Zip: BRONXVILLE NY 10708 City-State-Zip: WEST PALM BEACH FL 33401

Title D Title D

Name GUILD, CALLA Name SIEGEL, SHARON

Address 622 N. FLAGLER DRIVE Address 501 WARNER HILL ROAD

APT 201

City-State-Zip: WEST PALM BEACH FL 33401

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.

City-State-Zip:

C

SIGNATURE: RALPH GUILD

Electronic Signature of Signing Officer/Director Detail

SOUTHPORT CT 06490

04/22/2021 Date