

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 18, 1999 8:00am

Secretary of State

02-18-1999 90067 009 *****61.25



NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 713400

1. Corporation Name

LYNN AND LOUIS WOLFSON II, FAMILY FOUNDATION, INC.

Principal Place of Business

1 S.E. 3RD AVENUE
SUITE 1280
MIAMI FL 33131

Mailing Address

1 S.E. 3RD AVENUE
SUITE 1280
MIAMI FL 33131

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

09/29/1967

4. FEI Number

59-6196403

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be

Added to Fees

9. Name and Address of Current Registered Agent

AUERBACH, HAROLD
1 S.E. 3RD AVENUE
SUITE 1280
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE N/A

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME WOLFSON, LYNN
STREET ADDRESS 1 S.E. 3RD AVE., #1280
CITY-ST-ZIP MIAMI FL 33131

TITLE VT ☐ DELETE

NAME WOLFSON, LOUIS III
STREET ADDRESS 1 S.E. 3RD AVE., #1280
CITY-ST-ZIP MIAMI FL 33131

TITLE VT ☐ DELETE

NAME WOLFSON FADEL, LYNDIA
STREET ADDRESS 1 S.E. 3RD AVE., #1280
CITY-ST-ZIP MIAMI FL 33131

TITLE TT ☐ DELETE

NAME AUERBACH, HAROLD
STREET ADDRESS 1 S.E. 3RD AVE., #1280
CITY-ST-ZIP MIAMI FL 33131

TITLE T ☐ DELETE

NAME CAPRARO, FRANZ
STREET ADDRESS 1 S.E. 3RD AVE., #1280
CITY-ST-ZIP MIAMI FL 33131

TITLE S ☒ DELETE

NAME IRVING, J. BRUCE
STREET ADDRESS 501 BRICKELL KEY DR., #300
CITY-ST-ZIP MIAMI FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

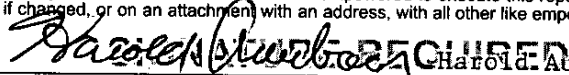
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

S
HENRY H. RAATTAMA, JR.
1 Southeast 3rd Ave. 28th Floor
Miami FL 33131

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Harold Auerbach**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/99

Date

305-377-8714

Daytime Phone #

CR2E037 (11/98)