1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 741519**

1. Corporation Name

EAR RESEARCH FOUNDATION, INC.

Principal Place of Business

Mailing Address

## Feb 17, 1999 8:00 am Secretary of State

02-17-1999 90095 022 \*\*\*\*61.25

1901 FLOYD ST 1901 FLOYD ST SARASOTA FL 34239 US US										
2 Bringing F	does of Rusiness	2a. Mailing Address			Date Incorporated or Qualifed					
21					02/03/1978					
	Suite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number	Applied For				
22					59-1862386 Not Applicable					
City & State City & State 28					5. Certificate of Status Desired					
Zip	Country				6. Election Campaign Financing	\$5.00 May Be				
24	25	29 30	ō		Trust Fund Contribution	Added to Fees				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
			81	Name						
RUSSELL, JEFFREY S.				Street Address (P.O. Box Number is Not Acceptable)						
240 S PINEAPPLE AVE										
SARASOTA FL 34236			83							
			84	City		85 Zip Code				
				"	<u> </u>	<b>L</b>     `				
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    Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	it signatule re	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12				
TITLE	PD OFFICERS AND	DELETE	1.1 TITLE			Change Addition				
NAME	SILVERSTEIN, HERBERT MD	<b>-</b>	1.2 NAME	]						
NAME	SILVERSTEIN, FIERDERT MU		I IV WILL	į.						

Ololli II Oli	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE: Re	egistered Agent signature rea	quired when reinstating)		DATE		
12.	OFFICERS AND (	13.	ADDITIONS/C	HANGES TO OFF	ICERS AND	DIRECTOR	S IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE				Change	Addition
NAME	SILVERSTEIN, HERBERT MD		1.2 NAME					
STREET ADDRESS	1317 VISTA DRIVE		1.3 STREET ADDRESS					
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITLE				Change	Addition
NAME	FELDBAUM, MAURICE		2.2 NAME					ļ
STREET ADDRESS	239 ROBIN DRIVE		2.3 STREET ADDRESS					
CITY-ST-ZIP	SARASOTA FL		2. 4 CITY-ST-ZIP					<u> </u>
TITLE	VPD	☐ DELETE	3.1 TITLE				Change	Addition .
NAME : , .	ROSENBERG, SETH MD		3.2 NAME				•	
STREET ADDRESS	1961 FLOYD STREET		3.3 STREET ADDRESS					
CITY ST-ZIP	SARASOTA FL 34239		3.4. CITY-ST-ZIP					<u>·</u>
TITLE	T	☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME .	BARBARIO, ALLAN		4.2 NAME ·	,				
STREET ADDRESS	1858 RINGLINE BLVD.		4.3 STREET ADDRESS		:		G. Committee	
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP		*	^ ; <sup>1</sup>	. <u> </u>	14 / 1
TITLE	SD	DELETE	5.1 TITLE				Change	Addition
NAME	DESENBERG, CHARLES		5.2 NAME					
STREET ADDRESS	1961 FLOYD STREET		5.3 STREET ADDRESS					
CTTY-ST-ZIP	SARASOTA FL 34239		5.4 CITY-ST-ZIP				<u> </u>	
TITLE	D	☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME	FELDBAUM, MAURICE		6.2 NAME					
STREET ADDRESS	239 ROBIN DRIVE		6.3 STREET ADDRESS					
CITY OT 78D	SARASOTA FL 34236		6.4 OTTY-ST-ZIP					

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 effect 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 an other like empowered.

SIGNATURE: