

# 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

05 SEP 29 PM 2:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



07202005 Chg-NP CR2E037 (10/03)

4. FEI Number **59-2587708** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**DOCUMENT # 765350**  
1. Entity Name  
**THE TOWN FOUNDATION, INC.**



Principal Place of Business  
**2500 WESTON ROAD  
SUITE 101  
WESTON, FL 33331**

Mailing Address  
**2500 WESTON ROAD  
SUITE 101  
WESTON, FL 33331**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

6. Name and Address of Current Registered Agent

**BATES, PATRICIA A  
2500 WESTON ROAD  
SUITE 101  
WESTON, FL 33331**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Amended AR is \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FLINT, JOHN R 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WINKLEJOHN, PAUL 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BATES, PATRICIA A 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD HERSH, ERIC 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHERMAK, MURRAY 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STERMER, DANIEL 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHEREN, SHARON 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENRIKSSON, MERCEDES 2500 WESTON ROAD, SUITE 101 WESTON, FL 33331	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<p>600060714056 10/18/05-01043--011 **\$61.25</p>		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

**SIGNATURE:** John R Flint **JOHN R FLINT, PRESIDENT 09.20.2005 99A 389 2000**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #