2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2007
Secretary of State

DOCUMENT# N03000002956

Entity Name: STRAUSS FAMILY FOUNDATION, INC.

Current Principal Place of Business:

3838 TAMIAMI TRAIL NORTH #300
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

3838 TAMIAMI TRAIL NORTH #300
NAPLES, FL 34103

New Mailing Address:

FEI Number: 54-2105971 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOODMAN BREEN & GIBBS
3838 TAMIAMI TRAIL NORTH #300
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STRAUSS, GERHARD H
Address: 4651 GULF SHORE BLVD. NORTH #1102
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete
Name: STRAUSS, GLORIA
Address: 4651 GULF SHORES BLVD. NORTH #1102
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete
Name: STRAUSS, GREGORY
Address: 9098 POWELL
City-St-Zip: ST. LOUIS, MO 63144

Title: D ( ) Delete
Name: STRAUSS, GENEVIEVE
Address: 10 BURROUGHS LN.
City-St-Zip: ST. LOUIS, MO 63124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KENNETH D GOODMAN MGR 02/02/2007

Electronic Signature of Signing Officer or Director Date