

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 03, 2006
Secretary of State**

DOCUMENT# N03000010091

Entity Name: BARRY & JUDITH NELSON FAMILY FOUNDATION, INC.

Current Principal Place of Business:

C/O NELSON & LEVINE, P.A.
2775 SUNNY ISLES BLVD., SUITE 118
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

C/O NELSON & LEVINE, P.A.
2775 SUNNY ISLES BLVD., SUITE 118
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 56-2416504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, BARRY A
2775 SUNNY ISLES BLVD.
SUITE 118
NORTH MIAMI BEACH, FL 33160 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: PTD () Delete
Name: NELSON, BARRY A
Address: 2775 SUNNY ISLES BLVD. #118
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VPSD () Delete
Name: NELSON, JUDITH
Address: 200 GOLDEN BEACH DRIVE
City-St-Zip: GOLDEN BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BARRY A. NELSON

P

01/03/2006

Electronic Signature of Signing Officer or Director

_____ Date