## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT #** MORRAN 121

FILED								
May 01 1998	8:00am							
Secretary of	State							

1. Corporation Name									
COYNE FAMILY FOUNDATION, INC.									
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Principal Plac	Principal Place of Business Mailing Address						s sannings am anzind einem linn azerr mist blibt einen einer diebt diebt giete Sebrt idet		
8612 TWIN LAN	8812 TWIN LAKE DRIVE 8812 TWIN LAKE DRIVE					3. Date incorporated or Qualified			
BOCA RATON	FL 33496		BO	CA RATON FL 33496				11/27/1984	
								4. FEI Number Applied For	
								59-2473967 Not Applicable	
2. Principal Place of Business 2a. Malling Address				_		5. Certificate of Status Desired \$8.75 Additional			
21 26						Fee Required			
Suite, Apt. #, etc. Suite,			Suite, Apt. #, etc.	ite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & Stat	e			City & State	City & State			7. Is this nonprofit corporation a homeowners association?	
23 2			28					Yes No	
Zip		Country	$\vdash$	Zip		ntry		8. This corporation owes or has paid the current year intangible	
24	0 Name	25 and Address of Curr	29	lered Agent	30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
<u> </u>	9, 1401114	ALIC MODITOR OF COM	any Madie	MINU AGENT		1	Name	10. Hame and Address of feet registered Agent	
COANE	MADTIN I					1			
	COYNE, MARTIN L. 8812 TWIN LAKE DRIVE			8	2	Strøet Addre	ddress (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33498		B	3						
					8	4	City	85 Zip Code	
11. Pursuant	to the provis	sions of Sections 617.0	502 and 6	17.1508 Florida Statu	tes the abo	VA	-named corp	ovation submits this statement for the purpose of changing its registered	
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 regist 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 registe agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							on's board of directors. I hereby accept the appointment as registered		
1	IIII IGII HAGA W	iui, aiko accept tria coi	igation is of	1, 00010/10/17:0505, 71	Office Statut	00	•		
SIGNATURE	Signature, typed	or printed name of registered s	spent and title	if applicable. (NO	E: Registered A	ger	nt signature require	ed when reinstating) DATÉ	
12.		OFFICERS A	ND DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	444000041		☐ DELETE	1.1 TITLE		l	☐ Change ☐ Addition	
NAME		, MARTIN L			1.2 NAMI				
STREET ADDRESS		MN LAKE DR.					ADDRESS		
CITY-ST-ZIP TITLE			1.4 CITY- 2.1 TITLE	_	-217	☐ Change ☐ Addition			
NAME			2.2 NAME						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	1 2001 21201 21		2. 4 CITY		· · · · · · · · · · · · · · · · · · ·				
TITLE			3.1 TITLE	_		Change Addition			
NAME	COYNE, MELISSA ANN 320		3.2 NAME	E					
STREET ADDRESS	, (=: :::: = =:: =: : =: :		3.3 STREI	ET /	ADDRESS				
CITY-ST-ZIP			3.4. CITY	_	T-ZIP				
TITLE	TD	D. 10.051 I		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition	
NAME	- A A 141 A	, RUSSELL			4. 2 NAM	_	4000000		
STREET ADDRESS	CHICAG	DICKENS AVE					ADDRESS		
CITY-ST-ZIP TITLE	D	IC IL		DELETE	4.4 CITY- 5.1 TITLE		· ZIP	☐ Change ☐ Addition	
NAME	_	JEROME			5.2 NAME			print a consider a manufact	
STREET ADORESS		RK AVE, 20TH FLOO	R				ADDRESS		
CITY-ST-ZIP	NEW YO		•		5.4 CITY-				
TITLE				☐ DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME					8.2 NAME	:			
STREET ADDRESS					6.3 STREE	ET /	ADDRESS		
CITY-ST-ZIP					6.4 CITY	ST	r- ZIP		

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 as suppliemental 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 frustee 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.

4-21-98