

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13909

FILED
Jan 05, 2011
Secretary of State

Entity Name: THE CELIA LIPTON FARRIS AND VICTOR W. FARRIS FOUNDATION, INC.

Current Principal Place of Business:

% PETER VAN ANDEL
777 S. FLAGLER DR. SUITE 500E
WEST PALM BEACH, FL 33401

New Principal Place of Business:

C/O BETTE K. CONRAD
777 S. FLAGLER DR. SUITE 500E
WEST PALM BEACH, FL 33401

Current Mailing Address:

% PETER VAN ANDEL
777 S. FLAGLER DR. SUITE 500E
WEST PALM BEACH, FL 33401

New Mailing Address:

C/O BETTE K. CONRAD
777 S. FLAGLER DR. SUITE 500E
WEST PALM BEACH, FL 33401

FEI Number: 22-6041585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN ANDEL, PETER
777 SOUTH FLAGLER DRIVE
SUITE 500 EAST
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

CONRAD, BETTE K
777 SOUTH FLAGLER DRIVE
SUITE 500 EAST
WEST PALM BEACH, FL 33401 US

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: BETTE K. CONRAD

01/05/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FARRIS, CECELIA L
Address: 319 EL VEDADO RD.
City-St-Zip: PALM BEACH, FL

Title: D
Name: FARRIS, CECILE VICTORI
Address: 5 CALLE CABITO
City-St-Zip: SANTE FE, NM

Title: DS
Name: VAN ANDEL, PETER
Address: 777 S. FLAGLER DR S 500E
City-St-Zip: WEST PALM BCH, FL

Title: D
Name: BARROW, MICHAEL A
Address: 6401 S.W. 87TH AVE., #210
City-St-Zip: MIAMI, FL 33173

Title: D
Name: RETTERER, MARIAN F
Address: 1560 SW 17 ST
City-St-Zip: BOCA RATON, FL

Title: D
Name: FARRIS, GEORGE F
Address: 320 HIGHLAND AVENUE
City-St-Zip: MONTCLAIR, NJ 07043

I hereby 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 all other like empowered.

SIGNATURE: CECELIA L. FARRIS

P

01/05/2011

Electronic Signature of Signing Officer or Director

Date