FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N94000004370 (2) DOCUMENT #

THE SOLNIK FAMILY FOUNDATION, INC.

FILED Apr 08 1997 8:00am Secretary of State

11,20	ocian trimer rooms	200				
Principal Place of Business		Mailing Address			II ABSIL BAIN BBILL BEKKU KINN IBAIL BKIL IFBN	
7208 VALENCIA BOCA RATON	A DRIVE FL 334 33	7208 VALENCIA DRIVE BOCA RATON FL 33433-7	406			
					3. Date Incorporated or Qualified 09/06/1994	3a. Date of Last Report 04/18/1996
· · · · · · · · · · · · · · · · · · ·	Place of Business	2a. Mailing Address	iling Address		4. FEI Number 65-0519359	Applied For
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		00-00 19009	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country Zip		Country		8. This corporation has liability fo	` >_
24	25 9. Name and Address of Curre	nt Pagistared Apont	30	·	Florida Statutes 10. Name and Address of New R	Yes No
 	y, Name and Address of Curre	iit vedimenen waatit		Name	IV. Name and Address of New F	egistered Agent
COLVIN	MIVE					
SOLNIK, MIKE 7208 VALENCIA DRIVE				Street Add	ress (P.O. Box Number is Not Accepte	able)
	IATON FL 33433		1	13		
			};	34 City		85 Zip Code
<u>:</u>			- 1	,		 - _
11. Pursuant office or r	to the provisions of Sections 617.050 registered agent, or both, in the State	02 and 617.1508, Florida Statu a of Florida, Such change was	tes, the abo authorized	ove-named corpora	poration submits this statement for the tion's board of directors. I hereby according to the control of the con	purpose of changing its registered epi the appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of Socion 617.0503, F	lorida Slatu	les.	C 1 · 1/	11/2/07
SIGNATURE .	Signature, typed or printed name of registored ag		TE Designation	MIKE	ired when reinstaling)	7/3/9/
12.		ND DIRECTORS	13.	Agent Bighaldre redui	ADDITIONS/CHANGES TO OFF	
TITLE	D	☐ DELETE	1.1 1/11	E		Change Addition
NAME	SOLNIK, MIKE		1.2 NAN	1E		
STREET ADDRESS	7208 VALENCIA DRIVE		1.3 STR	ET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33433			'- S1 - ZIP		
TITLE	D	☐ DELETE	21 TITL	1		☐ Change ☐ Addition
NAME	SOLNIK, ESTHER B		2.2 NAN			
STREET ADDRESS	7208 VALENCIA DRIVE			EET ADDRESS		
CITY-ST-ZIP TITLE	BOCA RATON FL 33433	DELETE	2. 4 CH 3.1 TITL	Y+ST-ZIP E		Change Addition
NAME	RICHMAN, ANDREW M	—	3.2 NAM	1		
STREET ADDRESS	3634 PRINCETON PLACE		3.3 STR	ET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33496		3 4. CIT	Y-ST-ZIP		
TITLE		☐ DEFELE	4.1 TiTL	E		☐ Change ☐ Addition
NAME			4. 2 NA	AE .		
STREET ADDRESS				ET ADDRESS		ļ
CITY-ST-ZIP TITLE		DELETE	5.1 TITL	'-\$1-ZIP		Change Addition
NAME		Ent process	5.2 NAM			E SHAING E MOUIDON
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP			1	-SI-ZIP		
TITLE	7	☐ DELETE	6.1 TITU			☐ Change ☐ Addition
NAME			6.2 NAM	E		
STREET ADDRESS			6.3 STR	ET ADDRESS	•	· ·
CITY-ST-ZIP			64 CITY	-S1-ZIP		

I do 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 or supplemental 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 trustee 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.

U 12/97