

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005463

FILED
Mar 21, 2009
Secretary of State

Entity Name: THE SCHMIER FAMILY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

17879 LAKE ESTATES DRIVE
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

17879 LAKE ESTATES DRIVE
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 65-0710450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMIER, ALBERT
17879 LAKE ESTATES DRIVE
BOCA RATON, FL 33436 US

Name and Address of New Registered Agent:

SCHMIER, ALBERT S
17879 LAKE ESTATES DRIVE
BOCA RATON, FL 33436 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: ALBERT S SCHMIER

03/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHMIER, ALBERT
Address: 17879 LAKE ESTATES DR.
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: SCHMIER, MARCIA L
Address: 17879 LAKE ESTATES DR.
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: DEMARCO, JILL E
Address: 17 TALL TREE COURT
City-St-Zip: COLD SPRING HARBOR, NY 11724

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: SCHMIER, HELAINE A
Address: 12 WEST 72ND STREET
City-St-Zip: NEW YORK, NY 10023

Title: D () Change (X) Addition
Name: SCHMIER, JILL E
Address: 12 WEST 72ND STREET
City-St-Zip: NEW YORK, NY 10023

I hereby certify that the information supplied with this filing does not qualify 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: NED A. FUTTER

CPA

03/21/2009

Electronic Signature of Signing Officer or Director

Date