FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

Sandra B. Morth

Secretary of State
DIVISION OF CORPORTIONS

1997

DOCUMENT # N9600006336 (9)

RABISON FAMILY FOUNDATION, INC.

Principal Place of Business Mailing Address

1006 EAST CYPRESS DRIVE 1006 EAST CYPRESS DRIVE POMPANO BEACH FL 33069 POMPANO BEACH FL 33069-4102

FILED Mar 05 1997 8:00am Secretary of State



						1				3. Date Incorpo	rated or Qualified	3a. Da	ite of Last F	Report	
2. Principal P	lace of Busin	ess		2a. Maili	ng Address					4. FEI Number			1.26	oplied For	
21				26						applies	1				
					uite, Apt. #, etc.				Not Applicable S8.75 Additional						
22					5. Certificate of Status Desired Fee Required										
City & Stat	e	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees								
Zip Country					Zip Cou				\neg		tion has liability fo	r intencible			
24	25 29 3									Florida Statu		Yes [. 100.002,	
9. Name and Address of Current Registered Agent								10. Name and Address of New Registe							
						- 1	B1	Name							
DARISON EVELYN															
RABISON, EVELYN							82 Street Address (P.O. Box Number is Not Acceptable)								
1006 EAST CYPRESS DRIVE							83								
POMPANO BEACH FL 33069							63								
						Ī	B4	City				FL	85 Zip	Code	
11. Pursuant	to the provisi	ons of Section:	s 617.0502 a	nd 617.150	08, Florida Statute	s, the ab	ove	named c	orpor	ation submits this	statement for the	purpose of	changing it	ts 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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.															
ageni. i a	m ramılar wı	іп, али ассері	trie obligatio	ns or, sect	1100 617.0503, FIC	rida Statu	ites.	•							
SIGNATURE .	Stee about house	ni oustad nama ol s	- o plored exert ex	d tills 2 as alia	act. APT	- 6									
12.	Signature, typed or printed name of registered agent and little if applicable (NOTE: 6 OFFICERS AND DIRECTORS						Registered Agent signature require 13.				HANGES TO OFF	DATE	DIDECTOR	20 IAI 10	
TITLE	PRESIDENT AND DIR. DELETE						1.1 TITLE			ADDITIONS/C	FIANGES TO OFF	ICENS AND	Change	Addition	
NAME													L] Change	Magazion	
·	EVELYH RABISON						1.2 NAME								
STREET ADDRESS							1.3 STREET ADDRESS								
CITY-ST-ZIP						1.4 CIT		-ZIP						 	
TITLE	VILE	PRES	AND ?	DIA	TT DEFELE	2.1 TITL	.E						☐ Change	Addition	
NAME							2.2 NAME								
STREET ADDRESS	DR. Samuel RABISON 02173						2.3 STREET ADDRESS								
CłTY-SI-ZIP	117 KAIDAURD-LEXINGTON, MA						2. 4 CITY-ST-ZIP								
THILE	SECRE	TARY P	I Guy	>IR	' 🔲 DELETE	3.1 TITL	.E						☐ Change	Addition	
NAME	51 C 50 10 Carl C15 7						3.2 NAME								
STREET ADDRESS	SCUSISHKIN ST. TELAVIV, ISRAEL						3.3 STREET ADDRESS								
CITY-ST-ZIP	31.0212	HKIN M.	. 1.67		62591	3.4. CIT	Y-S1	r-zip							
1/3LE	TREA	SURFR			DELETE	4.1 TITL		1					Change	Addition	
NAME	EVELYN RABISON						4. 2 NAME						-		
STREET AODRESS	(F, V (F)	グルーグ・	2/10/12/V		_	4.3 STR	EET A	ADDAESS							
CITY-ST-ZIP	Pomp	CYRRE	. シラ・レト モカムリュ	61 3	33069	4.4 CfT1									
TITLE		-4	- · · · · · /	· •	DELETE	51 T/TL							Change	Addition	
NAME						5.2 NAM	AE.								
STREET ADDRESS						1		ODRESS							
CITY-SI-ZIP						5.4 CIT									
TITLE					DELETE	6 1 TITL							Change	Addition	
NAME						62 NAA								Hard Parallel	
STREET ADDRESS						1		ADDOCCO							
								ADDRESS							
CITY-ST-ZIP	ny certify that	the informatio	n supplied w	th this filin	a does not avalif	6.4 City	VAN	notion etc	tad is	Section 119 07/3	3)(i), Florida Statut	as I further	portify that	tho	
informatio	n indicated d	on this annual r	report or supt	olemental a	annual report is tr	ue and ac	COU	rate and t	hat m	ıv signature shall l	have the same leg apter 617, Florida	ial effect as	if made un	der oath: that	