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Mar 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000007176 (7)
1. Corporation Name
SCHIAVONE FAMILY FOUNDATION, INC.



Principal Place of Business OCEAN REEF CLUB 33 CARDINAL LANE KEY LARGO FL 33037	Mailing Address OCEAN REEF CLUB 33 CARDINAL LANE KEY LARGO FL 33037
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3. Date Incorporated or Qualified
12/29/1997

4. FEI Number 65-0795617	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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21. Principal Place of Business Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	25. Country	26. Mailing Address 90 G.M. VASEL	27. Suite, Apt. #, etc. 1600 PATERSON PLANK RD.	28. City & State SECAUCUS N.J.	29. Zip 07094	30. Country
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent
**SCHIAVONE, RONALD A
OCEAN REEF CLUB
33 CARDINAL LANE
KEY LARGO FL 33037**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	SCHIAVONE, RONALD A
STREET ADDRESS	OCEAN REEF CLUB, 33 CARDINAL LANE
CITY-ST-ZIP	KEY LARGO FL 33037
TITLE	D <input type="checkbox"/> DELETE
NAME	SCHIAVONE, JEAN R
STREET ADDRESS	OCEAN REEF CLUB, 33 CARDINAL LANE
CITY-ST-ZIP	KEY LARGO FL 33037
TITLE	D <input type="checkbox"/> DELETE
NAME	SCHIAVONE, CHRISTOPHER
STREET ADDRESS	5 COLLINS DRIVE
CITY-ST-ZIP	MORRISTOWN NJ 07960
TITLE	D <input type="checkbox"/> DELETE
NAME	DIALFONSO, ELISSA
STREET ADDRESS	247 LONG MEADOW ROAD
CITY-ST-ZIP	BEDMINSTER NJ 07921
TITLE	D <input type="checkbox"/> DELETE
NAME	DIMAGGIO, CORA
STREET ADDRESS	288 MORNING GLORY CT
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889
TITLE	D <input type="checkbox"/> DELETE
NAME	PIRTLE, JAMES A
STREET ADDRESS	79 MEADOW ROAD
CITY-ST-ZIP	WHITEHOUSE STATION NJ 08889

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE: _____ SIGNATURE REQUIRED

CR2E037 (10/97)