

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002938

FILED
Mar 10, 2006
Secretary of State

Entity Name: THE HANDLEY FOUNDATION, INC.

Current Principal Place of Business:

617 ISLE OF PALMS DR
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

2400 E LAS OLAS BLVD
PMB 423
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 58-2469598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANDLEY, RICHARD L
2400 E. LAS OLAS BLVD.
PMB 423
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVS () Delete
Name: HANDLEY, RICHARD L
Address: 617 ISLE OF PALMS DR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DV () Delete
Name: HOUGHTON, HELEN H
Address: 1016 FIFTH AVE
City-St-Zip: NEW YORK, NY 10028

Title: DPT () Delete
Name: HANDLEY, STEPHEN L
Address: 10 AZURE BRAE PO BOX 630
City-St-Zip: GRANTHAM, NH 03753

Title: DV () Delete
Name: HANDLEY, KENNETH G JR
Address: 724 FREEZE CREEK CIR
City-St-Zip: SALT LAKE CITY, UT 84108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD L. HANDLEY

D

03/10/2006

Electronic Signature of Signing Officer or Director

Date