## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010725

Entity Name: SHAPIRO FAMILY FOUNDATION, INC.

**Current Principal Place of Business:** 

C/O MR. RONALD SHAPIRO 1773 MITCHELL COURT PORT ORANGE, FL 32128

## **Current Mailing Address:**

C/O MR. RONALD SHAPIRO 1773 MITCHELL COURT PORT ORANGE, FL 32128

FEI Number: 26-1372643 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHAPIRO, RONALD 1773 MITCHELL COURT PORT ORANGE, FL 32128 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:

Electronic Signature of Registered Agent

Date

FILED Apr 17, 2015

**Secretary of State** 

CC6271545367

Officer/Director Detail:

Title TREASURER Title PRESIDENT

Name SHAPIRO, RONALD Name SHAPIRO, DAVID

Address 1773 MITCHELL COURT Address 1773 MITCHELL COURT

City-State-Zip: PORT ORANGE FL 32128 City-State-Zip: DAYTONA BEACH FL 32128

Title VP Title SECRETARY

Name SHAPIRO, CHELSEA Name SILBERT, MARCI

Address 1773 MITCHELL COURT Address 1773 MITCHELL COURT

City-State-Zip: DAYTONA BEACH FL 32128 City-State-Zip: DAYTONA BEACH FL 32128

Title DIRECTOR Title DIRECTOR

Name SHAPIRO, PHILLIP Name SHAPIRO, BECCA

Address 1773 MITCHELL COURT Address 1773 MITCHELL COURT

City-State-Zip: DAYTONA BEACH FL 32128 City-State-Zip: DAYTONA BEACH FL 32128

Title DIRECTOR

Name SHAPIRO, ADAM

Address 1773 MITCHELL COURT

City-State-Zip: DAYTONA BEACH FL 32128

I hereby 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 all other like empowered.

SIGNATURE: RONALD SHAPIRO TREASURER 04/17/2015