

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010725

**Entity Name:** SHAPIRO FAMILY FOUNDATION, INC.

**FILED**  
**Feb 27, 2014**  
**Secretary of State**  
**CC6703280871**

**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

**Officer/Director Detail :**

Title           TREASURER  
Name           SHAPIRO, RONALD  
Address        1773 MITCHELL COURT  
City-State-Zip: PORT ORANGE FL 32128

Title           PRESIDENT  
Name           SHAPIRO, DAVID  
Address        1773 MITCHELL COURT  
City-State-Zip: DAYTONA BEACH FL 32128

Title           VP  
Name           SHAPIRO, CHELSEA  
Address        1773 MITCHELL COURT  
City-State-Zip: DAYTONA BEACH FL 32128

Title           SECRETARY  
Name           SILBERT, MARCI  
Address        1773 MITCHELL COURT  
City-State-Zip: DAYTONA BEACH FL 32128

Title           DIRECTOR  
Name           SHAPIRO, PHILLIP  
Address        1773 MITCHELL COURT  
City-State-Zip: DAYTONA BEACH FL 32128

Title           DIRECTOR  
Name           SHAPIRO, BECCA  
Address        1773 MITCHELL COURT  
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**

**02/27/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date