

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008949

Entity Name: THE STACY BORELL HUMANITARIAN FOUNDATION, INC.**Current Principal Place of Business:**5 LASALLE AVE.
RYE, NY 10580**Current Mailing Address:**5 LASALLE AVE.
RYE, NY 10580 US**FEI Number:** 46-1012693**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD #221E
PALM BEACH GARDENS, FL 33410 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 PRESIDENT, DIRECTOR
Name BORELL, JONATHAN
Address 5 LASALLE AVE.
City-State-Zip: RYE NY 10580

Title VP, TREASURER, DIRECTOR
Name FISCHER, ERIK
Address 5 LASALLE AVE.
City-State-Zip: RYE NY 10580

Title DIRECTOR
Name FISCHER, CARLY
Address 5 LASALLE AVE.
City-State-Zip: RYE NY 10580

Title DIRECTOR
Name RASH, ALAN
Address 5 LASALLE AVE.
City-State-Zip: RYE NY 10580

Title DIRECTOR
Name STEIN, ROBERT DR
Address 5 LASALLE AVE.
City-State-Zip: RYE NY 10580

Title DIRECTOR, SECRETARY
Name VALINS, WHITNEY E
Address 5 LASALLE AVE.
City-State-Zip: RYE NY 10580

Title DIRECTOR
Name ROSS, JACK
Address 5 LASALLE AVE.
City-State-Zip: RYE NY 10580

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: JONATHAN BORELL**PRESIDENT****03/27/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date