

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000002976

Entity Name: LACHMAN FAMILY FOUNDATION, INC.

Current Principal Place of Business:

220 SUNRISE AVE.
SUITE 211
PALM BEACH, FL 33480

Current Mailing Address:

220 SUNRISE AVE.
SUITE 211
PALM BEACH, FL 33480 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LACHMAN, GARY S. ESQ.
525 OKEECHOBEE BOULEVARD, SUITE 900
WEST PALM BEACH, FL 33401 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: GARY S. LACHMAN, ESQ.

04/05/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D, P
Name LACHMAN, GARY S.
Address 525 OKEECHOBEE BOULEVARD,
SUITE 900
City-State-Zip: WEST PALM BEACH FL 33401

Title D,VP
Name LACHMAN, WILLIAM
Address 2962 W 27TH AVE
City-State-Zip: VANCOUVER BC V6L1W-3

Title D, T
Name LACHMAN, ROSLYN
Address 110 SUNSET AVE, #4A
City-State-Zip: PALM BEACH FL 33480

Title SECY
Name LACHMAN, WILLIAM
Address 2692 W 27TH AVE
City-State-Zip: VANCOUVER BC V6L1W-3

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: GARY S. LACHMAN

PRESIDENT, DIRECTOR

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date