

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

DOCUMENT# N94000003412

**Entity Name:** ALPHA/OMEGA CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**31 BROOKSIDE DRIVE  
GREENWICH, CT 06830**Current Mailing Address:**31 BROOKSIDE DRIVE  
GREENWICH, CT 06830**FEI Number:** 65-0510147**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES FOSTER SERVICE, LLC  
505 S FLAGLER DRIVE  
1100  
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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	VD
Name	KEEFE, ANITA
Address	21 AIKEN ROAD
City-State-Zip:	GREENWICH CT 06831

Title	SD
Name	GILBRIDE, FRANK JII
Address	31 BROOKSIDE DRIVE
City-State-Zip:	GREENWICH CT 06836

Title	VD
Name	VERDERBER, THOMAS
Address	104 LEE ROAD
City-State-Zip:	GARDEN CITY NY 11530

Title	PD
Name	DE LESSEPS, GEOFFREY
Address	12 HEATHER LANE
City-State-Zip:	LLOYD HARBOR NY 11743

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: FRANK J. GILBRIDE II****SECRETARY****01/10/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date