2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 700210

1. Entity Name
FRANK AND ANNA GOLDMAN FOUNDATION, INC.

Principal Place of Business	Mailing Address
6725 NORTHWEST 108 AVENUE PARKLAND, FL 33076	7630 FAY AVENUE LA JOLLA, CA 92037

DO NOT WRITE IN THIS SPACE

01032008 No Chg-NP   CR2E037 (4/06)

4. FEI Number	Applied For
59-0965237	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDMAN, KENNETH J
6725 NORTHWEST 108 AVENUE
PARKLAND, FL 33076

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000775346
01/08/08-80026-014 61.25

10.   OFFICERS AND DIRECTORS

TITLE	VD
NAME	GOLDMAN, RICHARD
STREET ADDRESS	773 BEDFORD OAKS
CITY-ST-ZIP	MARIETTA, GA 30068
TITLE	PD
NAME	GOLDMAN, MITCHEL P
STREET ADDRESS	7630 FAY AVENUE
CITY-ST-ZIP	LA JOLLA, CA 92037
TITLE	SD
NAME	GOLDMAN, KENNETH
STREET ADDRESS	6725 NORTHWEST 108 AVENUE
CITY-ST-ZIP	PARKLAND, FL 33076
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Mitchel Goldman_   1-4-08   858-459-7113

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #