

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712951

FILED  
May 02, 2008  
Secretary of State

Entity Name: ALBERT E. AND BIRDIE W. EINSTEIN FUND, INC.

**Current Principal Place of Business:**

109 SAN JUAN DRIVE  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 246  
ISLAMORADA, FL 33036

**New Mailing Address:**

FEI Number: 59-6127412      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

GARDNER, R.M.  
500 E BROWARD BLVD 14TH FLOOR  
FT. LAUDERDALE, FL 33394      US

**Name and Address of New Registered Agent:**

BOYER, JOYCE  
8713 SE RIVERFRONT TERRACE  
TEQUESTA, FL 33469      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: JOYCE BOYER

05/02/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: BOYER, JOYCE M  
Address: 8713 S.E. RIVERFRONT TERRACE  
City-St-Zip: TEQUESTA, FL 33469

Title: VD      ( ) Delete  
Name: LEE, MIKE  
Address: 505 VIA TOLEDO  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ST      ( ) Delete  
Name: SMITH, MIKE  
Address: 8692 S.E. NORTH PASSAGE WAY  
City-St-Zip: TEQUESTA, FL 33469

Title: DR      ( ) Delete  
Name: GARDNER, R M  
Address: 500 E. BROWARD BLVD  
City-St-Zip: FT. LAUDERDALE, FL 33394

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOYCE BOYER

PRES

05/02/2008

Electronic Signature of Signing Officer or Director

Date