2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007 08:00 AM
Secretary of State

DOCUMENT # 840077

1. Entity Name
THE RUSSEK FOUNDATION, INC.

The Russek Foundation Inc.
4400 N. Federal Hwy., Suite 210-02
Boca Raton, FL 33431

Principal Place of Business
BOCA RATON, FL 3343

Mailing Address
BOCA RATON, FL 3343

The Russek Foundation Inc.
4400 N. Federal Hwy., Suite 210-02
Boca Raton, FL 33431

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03122007 No Chg-NP CR2E037 (4/06)

4. FEI Number
13-1937346

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RUSSEK, ELAYNE
500 S. OCEAN BLVD.
BOCA RATON, FL 33432

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

Filing Fee is $61.25
Due by May 1, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PESHKIN, RICHARD, DR.
STREET ADDRESS	5227 A LAKE CATALINA DR
CITY-ST-ZIP	BOCA RATON, FL
TITLE	PS
NAME	RUSSEK, ELAYNE
STREET ADDRESS	500 S. OCEAN BLVD.
CITY-ST-ZIP	BOCA RATON, FL
TITLE	T
NAME	PESHKIN, KAREN
STREET ADDRESS	5227 A LAKE CATALINA DR
CITY-ST-ZIP	BOCA RATON, FL
TITLE	D
NAME	FARB, DAVID PH.D
STREET ADDRESS	868 NEWTON STREET
CITY-ST-ZIP	CHESTNUT HILL, MA
TITLE	VP
NAME	RUSSEK, SHELLEY J PH.D
STREET ADDRESS	868 NEWTON STREET
CITY-ST-ZIP	CHESTNUT HILL, MA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/27/07-80006-019 61.25

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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: Elayne Russek ELAYNE RUSSEK 3/13/07 561-368-1914
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #