

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000005430

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** THE BENNIE AND MARTHA BENJAMIN FOUNDATION, INC.

**Current Principal Place of Business:**

110 EAST 59TH STREET  
C/O BRAUN AND GOLDBERG  
NEW YORK, NY 10022

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DAVID A. BEALE, P.A.  
355 N.E. 5TH AVENUE, SUITE 1  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 13-3555717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEALE, DAVID A  
355 N.E. 5TH AVENUE, SUITE 1  
DELRAY BEACH, FL 33483 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: ALBERT, JACK N  
Address: 7500 BONDSBERRY COURT  
City-St-Zip: BOCA RATON, FL 33434

Title: DS  
Name: BEALE, DAVID A  
Address: 355 N.E. 5TH AVENUE, SUITE 1  
City-St-Zip: DELRAY BEACH, FL 33483

Title: DT  
Name: BRAUN, SEYMOUR  
Address: 110 EAST 59TH STREET, S-321  
City-St-Zip: NEW YORK, NY 10022

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: DAVID A. BEALE

MR.

03/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date