Applied For

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT #\_F93000001501

1. Corporation Name

## BERNARD A. AND CHRIS MARDEN FOUNDATION, INC.

Principal Place of Business C/O BERNARD A. MARDEN 1290 SO OCEAN BLVD PALM BEACH FL 33480

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

1290 SOUTH OCEAN BLVD PALM BEACH FL 33480

40 BERNARD

Suite, Apt. #, etc.

2a. Mailing Address

## **FILED** Mar 11, 1999 8:00 am § Secretary of State

03-11-1999 90107 039 \*\*\*\*61.25


3. Date Incorporated or Qualifed

03/17/1993

FEI Number

41//00 - 9010/ - 39

Suite, Apr. #, etc.		Oute, Apr. #, etc.			07.040000	1.4	
22		27 1290 SO, DCEX	NBL	VD.	65-0409920		t Applicable
City & State		City & State			5. Certificate of Status Desired	<b>\$8.75</b> A Fee Re	
23		28 PALM BEAC					<u> </u>
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00	•
24	25	29 33480 30	U	٠۶،	Trust Fund Contribution	Added to	o Fees
9. Nam	and Address of Current F	Registered Agent			10. Name and Address of New Registere	I Agent	
			81	Name		·	
MARDEN, BERNARI			82	Street A	Address (P.O. Box Number is Not Acceptable)	S. State (C.	,
1290 SO OCEAN B			83	-			
PALM BEACH FL 3:	480		103	ļ		1.5	
			84	City		85 Zip C	Code
1					corporation submits this statement for the purpose	<u> </u>	
agent. I am familiar v	gent, or both, in the State or rith, and accept the obligation d or printed name of registered agent a	ns of, Section 617.0503, Florida	Statutes	) <b>.</b>	oration's board of directors. I hereby accept the app		
12.	OFFICERS AND	170-1-17	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE DCPT		☐ DELETE	1.1 TITLE		· ·	Change	Addition
	, Bernard A		1.2 NAME			:	
	OCEAN BLVD	·	1.3 STREE	TADDRESS ]			
5444.5			1.4 CITY- S			**	
TITLE DVCS	<u>MOITTE</u>	DELETE	2.1 TITLE	1		Change	☐ Addition
1	, CHARLOTTE		2.2 NAME	İ			•
	UTH OCEAN BLVD		2.3 STREE	T ADDRESS			
CITY-ST-ZIP PALM BI			2. 4 CITY-S	ì			-
TITLE D	MOTITE	☐ DELETE	3.1 TITLE	* -		Change	Addition
} •	, JAMES P		3.2 NAME				
	RK AVENUE		3.3 STREE	TADDRESS	, ·		
CITY-ST-ZIP NEW YC			3.4. CITY-5	ST-ZIP		4.	
TITLE D	<u></u>	☐ DELETE	4.1 TITLE			Change	Addition
} -	ATRICE MARDEN		4. 2 NAME				
l i '	RVARD AVE., E.			TADDRESS			
CITY-ST-ZIP SEATTLE	•		4.4 CITY-S				
TITLE VPVC		☐ DELETE	5.1 TITLE			Change	Addition
	. CHARLOTTE		5.2 NAME				
[ —	OCEAN BLVD		5.3 STREE	TADDRESS			
CITY-ST-ZIP PALM B			5.4 CITY-S	IT-ZIP	· .	<u> </u>	
TITLE	<u>,</u>	☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME			, ,	
STREET ADDRESS			6.3 STREE	TADORESS			
CITY-ST-ZIP			6.4 CITY S	T-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 received or trustee empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an appear of the received of the corporation of the corporation of the received of the corporation of the corporation of the received of the corporation of the corporation of the received of the corporation of the corporation of the received of the corporation of the received of the corporation of the corporation of the received of the corporation of the received of the received of the corporation of the received of the rece

SIGNATURE:

A. MARDEN 3/01/99 (561)833-2001