

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morahan
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUN 24 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000000736 (6)

1. Corporation Name

BILTMORE FOUNDATION, INC.



Principal Place of Business

Mailing Address

340 NORTH AVE
CRANFORD NJ 07016

340 NORTH AVE
CRANFORD NJ 07016-2461

3. Date Incorporated or Qualified
02/13/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

22-3294769

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOEWENSTERN, ELLIOT
8700 N. ANDREW AVE, SUITE 500
FT LAUDERDALE FL 33309

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 800002224188--1
-06/26/97--01092--007

84 City

*****61.2FL *****61.25

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CP
NAME LOEWENSTERN, ELLIOT
STREET ADDRESS 8700 N. ANDREW AVE, SUITE 500
CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE D
NAME BRONSON, RICHARD
STREET ADDRESS 8700 N. ANDREW AVE, SUITE 500
CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE D
NAME BERNSTEIN, HARTLEY
STREET ADDRESS 8700 N. ANDREW AVE, SUITE 500
CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CP
1.2 NAME Loewenstern, Elliot
1.3 STREET ADDRESS 7227 Queens Ferry Circle
1.4 CITY-ST-ZIP BOCA RATON, FL 33496

2.1 TITLE D
2.2 NAME BRONSON, RICHARD
2.3 STREET ADDRESS 451 Ocean Blvd.
2.4 CITY-ST-ZIP Golden Beach, Florida 33160

3.1 TITLE D
3.2 NAME BERNSTEIN, HARTLEY
3.3 STREET ADDRESS 950 Third Ave
3.4 CITY-ST-ZIP New York, N.Y. 10022-7705

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 receiver 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 on an attachment with an address.

CR2E037 (9/96)