## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600005312 (1)

## THE EDLAVITCH AND TYSER FOUNDATION INC-

## FILED Jan 30 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						Lagitus 4418   10110   01715   00141   00111   00112   00141   01100   11401   11015   1101   11015
500 S OCEAN BLVD P.O. BOX 39234						3. Date Incorporated or Qualified
1408 WASHINGTON DC 20016						10/11/1996
BOCA RATON FL 33432						4. FEI Number Applied For
00						52-1423806 Not Applicable
2. Principal i	Place of Business	2a. Mailing Address 26				5. Certificate of Status Desired S8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees
City & Sta	ite	City & State				7. Is this nonprofit corporation a homeowners association?
23		28			☐ Yes ☒ No	
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible
24	25 29 30		30			Personal Property Tax due June 30. 🗵 Yes 🗌 No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent
				81	Name	•
EDLAVITCH, SELMA T				82	Street Addre	ess (P.O. Box Number is Not Acceptable)
500 SOUTH OCEAN BOULEVARD, APT. 1408						
BOCA RATON FL 33432-6251				83		
				84	City	FL 85 Zip Code
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 registance 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 regist agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.						oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE Selma J. Edlavately					nt signature required	1-14-98
12.		ID DIRECTORS	13.	- 195		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 73	TLE		Change Addition
NAME	EDLAVITCH, SELMA T		1.2 NA	AME	ĺ	
STREET ADDRESS			1.3 ST	1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432-6251		1.4 CF	1.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	2.1 TITLE			Change Addition
NAME	GREENSTEIN, MARK		2.2 NA	2.2 NAME		
STREET ADDRESS			23 ST	2.3 STREET ADDRESS		
CITY-ST-ZIP	WASHINGTON DC 20016		2. 4 C	2. 4 CITY-ST-ZIP		•
TITLE	D	DELETE	3.1 TITLE			Change Addition
NAME	LUSTIG, M B RABBI		3.2 NA	3.2 NAME		
STREET ADDRESS % WASH. HEBREW CONG./MACOMB @ MASS AV NW		3.3 ST	3.3 STREET ADDRESS			
CITY-ST-ZIP	1440-1410-4014		3.4. Ci	3.4. CITY-ST-ZIP		
TITLE	DELETE		4.1 TI	4.1 TITLE		☐ Change ☐ Addition
NAME	AME		4. 2 N/	4. 2 NAME		
STREET ADDRESS			4.3 ST	reet a	NDDRESS	
CITY-ST-ZIP			4.4 CI	TY-ST-	-71P	

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 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.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIP

MATERIAL HOLDED

DELETE

DELETE

1-14-98 561-392-8950

Change

Addition

\_\_\_ Addition