

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000771

FILED
Apr 13, 2005
Secretary of State

Entity Name: LENORE R. BLAND AND SYDNEY F. BLAND CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

C/O ROBERT HENRY SILVERS
1140 KANE CONCOURSE, 5TH FLR.
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

C/O ROBERT HENRY SILVERS
1140 KANE CONCOURSE FIFTH FLOOR
BAY HARBOR ISLANDS, FL 33154 US

Current Mailing Address:

C/O ROBERT HENRY SILVERS
1140 KANE CONCOURSE, 5TH FLR.
BAY HARBOR ISLANDS, FL 33154

New Mailing Address:

C/O ROBERT HENRY SILVERS
1140 KANE CONCOURSE FIFTH FLOOR
BAY HARBOR ISLANDS, FL 33154 US

FEI Number: 65-0980024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SILVERS, ROBERT HENRY
1140 KANE CONCOURSE
5TH FLR.
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

ROBERT HENRY SILVERS, C.P.A., P.A.
1140 KANE CONCOURSE
FIFTH FLOOR
BAY HARBOR ISLANDS, FL 33154 US

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: ROBERT HENRY SILVERS

04/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: GOLDEN, CARYN
Address: 13 PALEST INC DRD
City-St-Zip: NEWTOWN, CT 06470

Title: TD () Delete
Name: GOLDEN, JOSEPH
Address: 13 PALESTINE RD
City-St-Zip: NEWTOWN, CT 06470

Title: D () Delete
Name: BLAND, NORMAN D
Address: PO BOX 21
City-St-Zip: PLAINFIELD, MA 010700021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change () Addition
Name: GOLDEN, CARYN
Address: 13 PALESTINE ROAD
City-St-Zip: NEWTOWN, CT 06470 US

Title: TD (X) Change () Addition
Name: GOLDEN, JOSEPH
Address: 13 PALESTINE ROAD
City-St-Zip: NEWTOWN, CT 06470 CT

Title: D (X) Change () Addition
Name: BLAND, NORMAN D
Address: P.O. BOX 21
City-St-Zip: PLAINFIELD, MA 01070

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARYN GOLDEN

D

04/13/2005

Electronic Signature of Signing Officer or Director

Date