

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2006
Secretary of State

DOCUMENT# N00000000771

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 FIFTH FLOOR
BAY HARBOR ISLANDS, FL 33154 US

New Principal Place of Business:

C/O CRAIG DEARR, SUITE 1609
2 DATRAN CENTER, 9130 S. DADELAND BLVD
MIAMI, FL 33156 US

Current Mailing Address:

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

New Mailing Address:

C/O CRAIG DEARR, SUITE 1609
2 DATRAN CENTER, 9130 S. DADELAND BLVD
MIAMI, FL 33156 US

FEI Number: 65-0980024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

DEARR, CRAIG ESQ
2 DATRAN CENTER, 9130 S. DADELAND BLVD
SUITE 1609
MIAMI, FL 33156 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: CRAIG DEARR, ESQ.

04/04/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOSEPH GOLDEN

T

04/04/2006

Electronic Signature of Signing Officer or Director

Date