

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 21, 2003 8:00 am
Secretary of State

01-17-2003 90052 027 ****61.25

DOCUMENT # N00000000771



1. Entity Name
**LENORE R. BLAND AND SYDNEY F. BLAND CHARITABLE F
OUNDATION, INC.**

Principal Place of Business Mailing Address
C/O BARASH & ASSOCIATES, P.A. **C/O BARASH & ASSOCIATES, P.A.**
1140 KANE CONCOURSE **1140 KANE CONCOURSE**
BAY HARBOR ISLANDS FL 33154 **BAY HARBOR ISLANDS FL 33154**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

4. FEI Number **65-0980024** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

A. JEFFREY BARASH, ESQUIRE
C/O BARASH & ASSOCIATES, P.A.
1140 KANE CONCOURSE
BAY HARBOR ISLANDS FL 33154

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLAND, LENORE R <input checked="" type="checkbox"/> Delete 9100 W. BAY HARBOR DRIVE BAY HARBOR ISLANDS FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GOLDEN, CARYN <input type="checkbox"/> Delete 4 OLD COUNTRY ROAD 13 PALESTINE RD. NEW FAIRFIELD CT 06811 NEWTON, CT. 06470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GOLDEN, JOSEPH <input type="checkbox"/> Delete 4 OLD COUNTRY ROAD 13 PALESTINE RD. NEW FAIRFIELD CT 06811 NEWTON, CT. 06470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD - CARYN GOLDEN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13 PALESTINE ROAD NEWTON, CT 06470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.F.D. - JOSEPH GOLDEN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13 PALESTINE ROAD NEWTON CT 06470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Norman Davis Bland PO BOX 21 PLAINFIELD MA 01070-0021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/11/03 Daytime Phone #: 203-364-0341

CR2E037 (10/02)

Attachment
#N000000000771
BARASH & ASSOCIATES, P.A.
ATTORNEYS AT LAW

58009600

A. JEFFREY BARASH
BOARD CERTIFIED TAX ATTORNEY
AND MEMBER OF
FLORIDA, NEW YORK AND CALIFORNIA BARS

TELEPHONE (305) 868-7800
TELEFAX (305) 866-4276
E-MAIL: ajbarash@aol.com

KANE CONCOURSE EXECUTIVE BUILDING
1140 KANE CONCOURSE
BAY HARBOR ISLANDS, FLORIDA 33154-2055

February 18, 2003

Divisions of Corporations
Annual Reports Section
Post Office Box 1500
Tallahassee, FL 32302-1500

Re: *Lenore R. Bland and Sydney F. Bland Charitable Foundation*
Reference No. N000000000771

Dear sir or Madam:

Enclosed is the photocopy 2002 Not-For-Profit Corporation Uniform Business report (UBR) that has been completed in red to indicate a third Director for the above-referenced Charitable Foundation. Please note that the Director uses a post office box as his legal address.

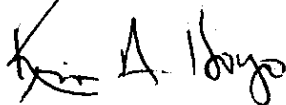
The original signed report was not returned to us and corrections have been made to the photocopy.

Please proceed to file the report as corrected.

Also enclosed for your reference is a copy of your letter regarding this matter.

If you have any questions regarding this matter, we look forward to hearing from you.

Very truly yours,



Kim A. Hoyo, CLA

Enclosures

cc: Mrs. Caryn Golden (*w/photocopy enclosure*)
Mr. Joseph Golden (*w/photocopy enclosure*)
Mr. Norman D. Bland (*w/photocopy enclosure*)
A. Jeffrey Barash, Esq. (*w/o enclosure*)