## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000004832

FILED Feb 28, 2006 Secretary of State

Entity Name: VAN BUREN FAMILY FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 369 S. LAKE DRIVE PALM BEACH, FL 33480 **Current Mailing Address: New Mailing Address:** 2855 PGA BLVD PALM BEACH GARDENS, FL 33410 FEI Number: 65-1027178 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VAN BUREN, ROBERT 369 S. LAKE DRIVE PALM BEACH, FL 33480 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition VAN BUREN, ROBERT Name: Name: 369 S. LAKE DRIVE Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition VAN BUREN, ANN Name: VAN BUREN, CYNTHIA Name: Address: 369 S. LAKE DRIVE Address: 127 PERUVIAN City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480 Title: () Delete Title: (X) Change ( ) Addition VAN BUREN, CYNTHIA VAN BUREN, ROBERT S Name: Name: Address: 127 PERUVIAN Address: **BOX 414** City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: SHIP BOTTOM, NJ 08088 Title: ( ) Delete Title: (X) Change ( ) Addition VAN BUREN, ROBERT S Name: Name: VAN BUREN, MARCIA Address: **BOX 414** Address: 17 W. 54TH STREET SHIP BOTTOM, NJ 08088 City-St-Zip: City-St-Zip: NEW YORK, NY 10019 Title: (X) Delete Title: () Change () Addition BROWN, MARCIA Name: Name: 17 W. 54TH STREET Address: Address: City-St-Zip: NEW YORK CITY, NY 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: ROBERT VAN BUREN D 02/28/2006