2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

DOCUMENT # N0000006229

	ANNUAL RE	Feb	Feb 16, 2005 8:00 am					
DOCUMENT # N0000006229 1. Entity Name				Se Se	Secretary of State			
THE AVE	LLINO FAMILY FOUNDATION	N, INC.		02	-16-2005 90042 ()27 ****61.25		
Principal Place of Business		Mailing Address						
4750 NE 23RD AVENUE FORT LAUDERDALE FL 33308-4721		4750 NE 23RD AVENU FORT LAUDERDALE FI				001010	Ō	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st M	OORE CR2	E037 (10/04)		
City & State		City & State		4. FEI Number	65-1043563	<u> </u>	plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of S	Status Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current R	egistered Agent		7. Name and Ad	dress of New Registe	red Agent		
AND TO BE AND TO SERVICE AND THE SERVICE AND T			Name	Name				
475	ELLINO, FRANK J O NE 23RD AVENUE RT LAUDERDALE FL 33308-4			ddress (P.O. Box Number is	Not Acceptable)			
. 0.	TO ELLE TE GOOD T		City			FL Zip Code)	
C The chave	named entity submits this statement for	the number of changing its	rogistared office o	r radiatored agent or both i			and account	
	tions of registered agent.	the purpose of changing its	registered office o	r registered agent, or bottl, r	if the state of Florida.	ani ianima wili,	and accept	
CIONIATURE								
SIGNATURE.	Signature, typed or printed name of registered agent an	id title if applicable. (NOTE	: Registered Agent signat	ure required when reinstating)	D	ATE		
0205/02/25/106/25/2	FILE NOW: FEE IS \$61,25 Due By May 1, 2005	9. Election Carr Trust Fund C	npaign Financing contribution.	\$5.00 May Be Added to Fees		neck Payable		
ar and a second								
10.	OFFICERS AND DIRE		11.	ADDITIONS/CHANG	GES TO OFFICERS AN			
TITLE NAME	AVELLINO, FRANK J	☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS	4750 NE 23RD AVENUE		STREET ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL 33308-472	1	CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE			☐ Change	☐ Addition	
NAME	AVELLINO, NANCY CARROLL		NAME					
	4750 NE 23RD AVENUE FORT LAUDERDALE FL 33308-472	1	STREET ADORESS				;	
CITY-ST-ZIP			CITY-ST-ZIP			, , , , , , , , , , , , , , , , , , ,		
TITLE	D AVELLINO, JOSEPH	☐ Delete	THTLE	AVELLING, JOS	EPH	Change Change	Addition	
NAME STREET ADDRESS	24 HOWLAND ROAD		STREET ADDRESS	55 STATE PAR	K ROAN			
CITY-ST-ZIP	MIDDLETOWN NJ 07748-3059		CITY-ST-ZIP	CHELTER, Não				
TITLE	D	☐ Defete	TITLE			☐ Change	Addition	
NAME	MCEVOY, LORRAINE A		NAME					
STREET ADDRESS	65 NAVESINK AVENUE RUMSON NJ 07760		STREET ADDRESS					
CITY-ST-ZIP	D D		CITY-ST-ZIP					
TITLE	AVELLINO, THOMAS	Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS	4750 NE 23RD AVENUE	-	NAME STREET ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL 33308-472	1	CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE	A		∑ Сһалде	Addition	
NAME	ROSENTHAL, RACHEL ANNE		NAME	ROSENTURE RA	THEL ANNE			
STREET ADDRESS	ONE UNION SQUARE SOUTH #21J		STREET ADDRESS	235 WEST TH	4 ST. APT 39	<u>.</u>		

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

NEW YORK NY 10003

Frank J. Alellina SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS 235 WEST 76H ST., APT 34

NEW 102X, NY 10023

954.776.7141

FILED

Daytime Phone #