

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008463

FILED
Apr 27, 2009
Secretary of State

Entity Name: JEFFREY I. SIMONS FOUNDATION, INC.

Current Principal Place of Business:

4799 SANCTUARY LANE
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

4799 SANCTUARY LANE
805
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 22-3770537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SIMONS, JEFFREY
Address: 4799 SANCTUARY LANE
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: MCNELLIS, DENISE
Address: 4799 SANCTUARY LN
City-St-Zip: BOCA RATON, FL 33431

Title: T () Delete
Name: SIMONS, ANDREW
Address: 276 INDIAN TRAIL DRIVE
City-St-Zip: FRANKLIN LAKES, NJ 07417

Title: T () Delete
Name: SIMONS, JENNIFER
Address: 276 INDIAN TRAIL DR
City-St-Zip: FRANKLIN LAKES, NJ 07417

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: JEFFREY SIMONS

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date