2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00493

FILED Jun 1<u>2, 2012</u> Secretary of State

Entity Name: THE EDWARD AND LUCILLE KIMMEL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

625 N. FLAGLER DR., ROOM 506A 625 N. FLAGLER DR., ROOM 504 W. PALM BCH., FL 33401

W. PALM BCH., FL 33401

New Mailing Address: Current Mailing Address:

625 N. FLAGLER DR., ROOM 506A 625 N. FLAGLER DR., ROOM 504

W. PALM BCH., FL 33401 W. PALM BCH., FL 33401

FEI Number: 59-2380662 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

EIGEN, JOAN K EIGEN, JOAN K

625 N. FLAGLER DR., ROOM 506A 625 N. FLAGLER DR., ROOM 504 W. PALM BCH., FL 33401 W. PALM BCH., FL 33401

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: 06/12/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

DPS

Name: EIGEN, JOAN K

Address: 1616 NORTH OCEAN BOULEVARD

City-St-Zip: PALM BCH, FL 33480

Title:

Name: BARTH, DEBORAH Address: 1327 WINDY HILL RD. City-St-Zip: MC LEAN, VA 22102

Title:

KIMMEL, DAVID Name: 612 N JEFFERSON ST Address: City-St-Zip: ARLINGTON, VA 22205

DVPT Title:

Name: EIGEN, DAVID L 5 RUSTIC LANE Address: WESTPORT, CT 06880 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: JOAN K. EIGEN **PRES** 06/12/2012