

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90060 017 ****61.25

DOCUMENT # N02000002137 1. Entity Name THE SENIOR FOUNDATION CORP.			
Principal Place of Business 401 NORTHEAST MIZNER BOULEVARD SUITE T-303 BOCA RATON, FL 33432		Mailing Address POST OFFICE BOX 1772 BOCA RATON, FL 33429	
2. Principal Place of Business 3200 N. Federal Hwy Suite, Apt. #, etc. 206-22		3. Mailing Address Suite, Apt. #, etc. 	
City & State BOCA RATON FL		City & State 	
Zip 33431		Country USA	
4. FEI Number 04-3630165		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOFFMAN, STUART C P.A. 2600 N MILITARY TRAIL STE 290 BOCA RATON, FL 33431		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$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 GORDON, J. ROBERT <input type="checkbox"/> Delete 401 NORTHEAST MIZNER BOULEVARD STE T-303 BOCA RATON, FL 33432	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD ROLLENHAGEN, DIANE H <input type="checkbox"/> Delete 401 NORTHEAST MIZNER BOULEVARD STE T-303 BOCA RATON, FL 33432	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD DAVIS, JILL S <input type="checkbox"/> Delete 401 NORTHEAST MIZNER BOULEVARD STE T-303 BOCA RATON, FL 33432	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T KATLIN, SHEILA <input checked="" type="checkbox"/> Delete 7472 LA PAZ PL 102 BOCA RATON, FL 33433	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Treasurer CAROL VAGA-HAUSER 3200 N. Federal Hwy Suite 206-22 BOCA RATON FL 33431
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Chief Financial Officer WLOYD HONICKMAN 401 NE MIZNER BLVD APT T-306 BOCA RATON FL 33432
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
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: <u>WLOYD HONICKMAN</u> 4/14/04 561 3619091 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			