

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007610

FILED
May 01, 2005
Secretary of State

Entity Name: THE SUSAN POLGAR FOUNDATION, INCORPORATED

Current Principal Place of Business:

107-23 71 ROAD, SUITE 137
FOREST HILLS, NY 11375

New Principal Place of Business:

Current Mailing Address:

107-23 71 ROAD, SUITE 137
FOREST HILLS, NY 11375

New Mailing Address:

103-10 QUEENS BLVD
1C
FOREST HILLS, NY 11375

FEI Number: 37-1444375 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TRUONG, HOANHAN M
25 CARLSON LANE
PALM COAST, FL 32164 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: P () Delete
Name: POLGAR, SUSAN
Address: 67-15 102ND STREET, (7U)
City-St-Zip: FOREST HILLS, NY 11375

Title: V () Delete
Name: TRUONG, PAUL
Address: 107-2371 ROAD, SUITE 137
City-St-Zip: FOREST HILLS, NY 11375

Title: S () Delete
Name: NIRO, FRANK
Address: 103-10 QUEENS BLVD #1C
City-St-Zip: FOREST HILLS, NY 11375

Title: D () Delete
Name: RIPKA, ALAN
Address: 275 MADISON AVE.
City-St-Zip: NEW YORK, NY 10016

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: D () Change (X) Addition
Name: COHEN, MICHAEL
Address: 605 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10158

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SUSAN POLGAR

P

05/01/2005

Electronic Signature of Signing Officer or Director

Date