

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 19, 2005
Secretary of State**

DOCUMENT# N02000008101

Entity Name: THE LILLIAN JEAN KAPLAN FOUNDATION, INC.

Current Principal Place of Business:

901 CYPRESS GROVE DRIVE SUITE 201
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

901 CYPRESS GROVE DRIVE SUITE 201
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 30-0127083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORKSON, ELLIOT P ESQ
1313 S. ANDREWS AVE.
FORT LAUDERDALE, FL 33316 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: AGUIAR, GUMA
Address: 802 N.E. 20TH AVE
City-St-Zip: FT.LAUDERDALE, FL 33304

Title: D () Delete
Name: DENISON, ROBERT
Address: 801 S.E. 9TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: MAGER, SCOTT
Address: 1 E. BROWARD BLVD. SUITE 1400
City-St-Zip: FORT LAUDERDALE, FL 33301

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:

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: GUMA AGUIAR

D

01/19/2005

Electronic Signature of Signing Officer or Director

_____ Date