## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000009619

FILED Mar 30, 2005 Secretary of State

Entity Name: ADELE YOUNGSTROM CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
440 HOL	A. KOFSKY LLYWOOD BLVI OOD, FL 33021	D., SUITE 450		
Current Mailing Address:		New Mailing Address:		
440 HOL	A. KOFSKY LLYWOOD BLVI OOD, FL 33021	D., SUITE 450		
El Numbe	r: 11-3667940	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
	EIN, MITCHELL I			
SUITE 20	FEDERAL HIGH 17-D ATON, FL 33431			
SUITE 20 SOCA RA The abov	17-D ATON, FL 33431	I US	purpose of changing its registere	ed office or registered agent, or both,
SUITE 20 SOCA RA The abov	77-D ATON, FL 33431 e named entity s te of Florida.	I US	purpose of changing its registere	ed office or registered agent, or both,
SUITE 20 SOCA RA The aboven the Sta	07-D ATON, FL 33431 e named entity s te of Florida. JRE:	I US		ed office or registered agent, or both,  Date
SUITE 20 SOCA RA The abov In the Star SIGNATU	07-D ATON, FL 33431 e named entity s te of Florida. JRE:	I US submits this statement for the ic Signature of Registered Ag	ent	
SUITE 20 SOCA RA The abov In the Star SIGNATU	ATON, FL 33431 e named entity ste of Florida.  JRE: Electron  RS AND DIRECT  CD ()  KOFSKY, DAVIE 4141 N. 35TH A	I US submits this statement for the ic Signature of Registered Agrons:  Delete D VE.	ent	Date
SUITE 20 BOCA RA The above the Sta SIGNATL  DFFICER itte: lame: ddress:	PATON, FL 33431 e named entity ste of Florida.  JRE: Electron  RS AND DIRECT  CD () KOFSKY, DAVIE 4141 N. 35TH AV HOLLYWOOD, II KOFSKY, LIZ 4141 N. 35TH AV	I US submits this statement for the submits this statement for the ic Signature of Registered Agronal Torks:  Delete OVE. FL 33021 Delete VE.	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: DAVID KOFSKY D 03/30/2005