2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N03000005599

1. Entity Name

ROBERT G. FRIEDMAN FOUNDATION, INC.



FILED Feb 28, 2005 08:00 AM Secretary of State

Principal Place of Business

76 ISLA BAHIA DR FT LAUDERDALE, FL 33316 Mailing Address

76 ISLA BAHIA DR

FT LAUDERDALE, FL 33316



01112005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-1726262

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'CONNOR, DANIEL P.J. ESQ BRINKLEY, MCNEREY, MORGAN, ETAL 200 E LAS OLAS BLVD STE 1900 FT LAUDERDALE, FL 33301

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T E ENODE	, (DALL, 1 L 00001				· · · · · · · · · · · · · · · · · · ·	
	named entity submits this statement for the plans of registered agent.	purpose of changing its register	ed office or registered a	igent, or both, in the Sta	ite of Florida. I am familiar wi	ith, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registere	d Agent signature required when	reinstating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Finar Trust Fund Contribution.	ncing \$5.00	May Be o Fees		
10.	OFFICERS AND DIRE	CTORS		The same of the base of the same of the sa		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIEDMAN, ROBERT G 76 ISLA BAHIA DR FT LAUDERDALE, FL 33316			jį.	C000247034**	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIEDMAN, ELIZABETH 76 ISLA BAHIA DR FT LAUDERDALE, FL 33316			DO NO	Γ WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS	SPACE	سيما ويونين بدوري
TITLE NAME STREET ADDRESS GITY-ST-ZIP					***	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			· .			
12. hereby	certify that the information supplied with this f	iling does not qualify for the exe	mption stated in Section	n 119.07(3)(i), Florida S	tatutes. I further certify that tr	e 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 reserver or trustement of the 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 attacking and that my name appears in Block 10 or Block 11 if changed, or on an attacking and that my name appears in Block 10 or Block 11 if changed.

SIGNATURE:

🕏 R.G. Friedman SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #