

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008957

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** THE WARREN FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

815 NE BAY ISLE DRIVE  
BOCA RATON, FL 33487

**New Principal Place of Business:**

815 NE BAY ISLE DR  
BOCA RATON, FL 33487

**Current Mailing Address:**

108 HUNT CLUB DR  
COLLEGEVILLE, PA 19426

**New Mailing Address:**

FEI Number: 56-2403637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WARREN, MARK  
815 NE 75TH ST  
BOCA RATON, FL 33487 US

**Name and Address of New Registered Agent:**

WARREN, MARK  
815 NE BAY ISLE DR  
BOCA RATON, FL 33487 US

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: MARK WARREN

04/17/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WARREN, MARK  
Address: 815 NE 75TH ST  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete  
Name: WARREN, SHARON  
Address: 815 NE 75TH ST  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete  
Name: COLGAN, SEAN P  
Address: 815 NE 75TH ST  
City-St-Zip: BOCA RATON, FL 33487

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: WARREN, MARK  
Address: 815 NE BAY ISLE DR  
City-St-Zip: BOCA RATON, FL 33487

Title: D (X) Change ( ) Addition  
Name: WARREN, SHARON  
Address: 815 NE BAY ISLE DR  
City-St-Zip: BOCA RATON, FL 33487

Title: D (X) Change ( ) Addition  
Name: COLGAN, SEAN P  
Address: 815 NE BAY ISLE DR  
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARK WARREN

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date