

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009937

FILED
May 13, 2010
Secretary of State

Entity Name: MASHKIN FAMILY FOUNDATION, INC.

Current Principal Place of Business:

5201 NW 2ND AVE, APT PHP
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

5201 NW 2ND AVE, APT PHP
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 20-0432330 **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:

Name and Address of New Registered Agent:

MASHKIN, KAREN B DR
5201 NW 2ND AVE, APT PHP
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MASHKIN, KAREN B
Address: 5201 NW 2ND AVE, APT PHP
City-St-Zip: BOCA RATON, FL 33487 US

Title: T
Name: SCHUSTER, MARTY S
Address: 5901 CAMINO DEL SOL, #307
City-St-Zip: BOCA RATON, FL 33433 US

Title: T
Name: COLEMAN, GAYLE
Address: 17216 HAMPTON BLVD
City-St-Zip: BOCA RATON, FL 334963013 US

I hereby 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 all other like empowered.

SIGNATURE: DR. KAREN MASHKIN

PRES

05/13/2010

Electronic Signature of Signing Officer or Director

Date