


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000007799	
1. Entity Name JACK SHAPIRO MATHEMATICS EDUCATION FOUNDATION, INC.	

Principal Place of Business 1221 GULF SHORE BLVD, N # 902 NAPLES, FL 34102	Mailing Address 1221 GULF SHORE BLVD, N # 902 NAPLES, FL 34102
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DO NOT WRITE IN THIS SPACE



01112007 No Chg-NP CR2E037 (4/06)

4. FEI Number 32-0123969	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WEISS, MARLA 1221 GULF SHORE BLVD, N NAPLES, FL 34102

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000589906 01/18/07-80031-006 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, MARLA 1221 GULF SHORE BLVD N, STE 902 NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, VALERIE 1221 GULF SHORE BLVD N, STE 902 NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, AMY 1221 GULF SHORE BLVD N, STE 902 NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Marla S. Weiss</u> MARLA S. WEISS	<u>1-10-07</u> 1-10-07	<u>239-261-6875</u> 239-261-6875
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>