2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 31, 2008 08:00 A Secretary of State

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1. Entity Name

JACK SHAPIRO MATHEMATICS EDUCATION

FOUNDATION, INC.

Mailing Address

Principal Place of Business 1221 GLFS-CFEBLVO, N

902 NAPLES PL 34102

1221 GLIFS-OFEBLVO, N # 902 NAPLES PL 34102



DO NOT WRITE IN THIS SPACE

01272008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 32-0123969 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEISS, MARLA 1221 GULF SHORE BLVD, N NAPLES, FL 34102

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the pions of registered agent.	purpose of changing its registered o	ffice or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Age	int signaturi	required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financing Trust Fund Contribution.	' _	\$5.00 May Be Added to Fees	U00000807396 02/07/08-80007-001 61.25		
10.	OFFICERS AND DIREC	CTORS	•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, MARLA 1221 GULF SHORE BLVD N, STE 902 NAPLES, FL 34102	2					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, VALERIE 1221 GULF SHORE BLVD N, STE 902 NAPLES, FL 34102	2.					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, AMY 1221 GULF SHORE BLVD N, STE 902 NAPLES, FL 34102	2	DO NOT WRITE				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							

12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP