

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012009

FILED
Sep 05, 2006
Secretary of State

Entity Name: THE CAROLE AND BARRY KAYE FOUNDATION, INC.

Current Principal Place of Business:

5100 TOWN CENTER CIRCLE
SUITE 550
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

5100 TOWN CENTER CIRCLE
SUITE 550
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 20-2204909 **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:

KAYE, BARRY
5100 TOWN CENTER CIRCLE
SUITE 550
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

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: D () Delete
Name: KAYE, BARRY
Address: 5100 TOWN CENTER CIRCLE #550
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: KAYE, CAROLE
Address: 5100 TOWN CENTER CIRCLE #550
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: KAYE, HOWARD
Address: 5100 TOWN CENTER CIRCLE #550
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BARRY KAYE

D

09/05/2006

Electronic Signature of Signing Officer or Director

Date