

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012051

FILED
Jul 25, 2005
Secretary of State

Entity Name: THE VERONICA ATKINS FOUNDATION, INC.

Current Principal Place of Business:

% GABRIEL MOSTAFAVI
109 ROYAL PALM WAY, 2ND FLR.
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

% GABRIEL MOSTAFAVI
109 ROYAL PALM WAY, 2ND FLR.
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 20-2080697 **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:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI, FL 33156 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: CHRP () Delete
Name: ATKINS, VERONICA
Address: 434 CHILEAN AVENUE PH-A
City-St-Zip: PALM BEACH, FL 33480

Title: SVD () Delete
Name: CORRIGAN, JOHN P
Address: 1355 QUARRY DRIVE
City-St-Zip: MOHEGAN LAKE, NY 10547

Title: VTD () Delete
Name: MEZZANOTTE, JOHN J
Address: 54 CHESTNUT HILL ROAD
City-St-Zip: KILLINGWORTH, CT 06419

Title: VD () Delete
Name: METZ, D. CLIVE
Address: 19470 AMBASSADOR COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SVD (X) Change () Addition
Name: CORRIGAN, JOHN P
Address: 253 WEAVER STREET #10-C
City-St-Zip: GREENWICH, CT 06831

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 Section 119.07(3)(i), 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: JOHN P. CORRIGAN

SVD

07/25/2005

Electronic Signature of Signing Officer or Director

Date