

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

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # N05000007933

1. Entity Name
**THE JILL HEATHER GOLDBERG CHARITABLE
FOUNDATION, INCORPORATED**



Principal Place of Business
**9400 SOUTH DADELAND BOULEVARD
600
MIAMI, FL 33156**

Mailing Address
**9400 SOUTH DADELAND BOULEVARD
600
MIAMI, FL 33156**



02182008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4303825

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MORGENSTERN, MELVIN C
9400 SOUTH DADELAND BOULEVARD
600
MIAMI, FL 33156**

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GOLDBERG, WALTER M
9701 SW 62ND CT
PINECREST, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GOLDBERG, ROSALIE J
9701 SW 62ND CT
PINECREST, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GOLDBERG, IAN J
9701 SW 62ND CT
PINECREST, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

UD00000866522
04/08/08-80037-019 61.25

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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:

Rosalie Goldberg **ROSALIE GOLDBERG** 3/12/2008 305 965 4477

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #