

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N05000010842

**FILED**  
**Oct 20, 2011**  
**Secretary of State**

**Entity Name:** THE MOLLY AND JOSEPH COOPER FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

3420 SOUTH OCEAN BLVD  
3X  
HIGHLAND BEACH, FL 33487

**New Principal Place of Business:**

20100 BOCA WEST DRIVE  
APT. 131  
BOCA RATON, FL 33434

**Current Mailing Address:**

3420 SOUTH OCEAN BLVD  
3X  
HIGHLAND BEACH, FL 33487

**New Mailing Address:**

20100 BOCA WEST DRIVE  
APT. 131  
BOCA RATON, FL 33434

**FEI Number:** 20-3642760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KLOSHEIM, J. HAROLD JR  
3420 SOUTH OCEAN BLVD.  
3X  
HIGHLAND BEACH, FL 33487 US

**Name and Address of New Registered Agent:**

COOPER, MOLLY  
20100 BOCA WEST DRIVE  
APT. 131  
BOCA RATON, FL 33434 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: MOLLY COOPER

10/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: COOPER, MOLLY  
Address: 20100 BOCA WEST DR.  
City-St-Zip: BOCA RATON, FL 33434

Title: DVP  
Name: COOPER-MONFRE, DIANE  
Address: 3420 PINE HAVEN CIR.  
City-St-Zip: BOCA RATON, FL 33434

Title: DSEC  
Name: WOLF, ROBERT M  
Address: 55 NE 5TH AVE., SUITE 500  
City-St-Zip: BOCA RATON, FL 33432

I hereby 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 all other like empowered.

SIGNATURE: MOLLY COOPER

DPT

10/20/2011

Electronic Signature of Signing Officer or Director

Date