## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000012627

FILED Jun 30, 2006 Secretary of State

Entity Name: LESLIE C. AND LEONARD A. SHAPIRO FAMILY FOUNDATION, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
	ANGE AVE., SUITE 1800 D, FL 32801	
Current M	lailing Address:	New Mailing Address:
	ANGE AVE., SUITE 1800 D, FL 32801	
In accordan	: 20-3956547 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation of	lid not receive the prior notice.
Name and	I Address of Current Registered Agen	t: Name and Address of New Registered Agent:
111 N. OR	SON, SHARAL L ANGE AVE., SUITE 1800 D, FL 32801 US	F & L CORP. ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, FL 32202 US
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATUI	RE: JOHN A. SANDERS, AUTHORIZEI	O AGENT 06/30/2006
	Electronic Signature of Registered	Agent Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D () Delete SHAPIRO, LEONARD A 339 3RD AVE. NORTH NAPLES, FL 34102	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete SHAPIRO, LESLIE C 339 3RD AVE. NORTH NAPLES, FL 34102	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete SHAPIRO, THEODORE M 2302 KENILWORTH AVE. LOS ANGELES, CA 90039	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete SHAPIRO, ALEXANDRA L 4674 OAKMERE TERR. STERLING, VA 20165	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete FREEDMAN, JAY W 3000 K ST., N.W., SUITE 500 WASHINGTON, DC 20007	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: LEONARD A. SHAPIRO D 06/30/2006