

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 07, 2006  
Secretary of State**

DOCUMENT# N05000012693

Entity Name: THE ROBERT AND NANCY AMATO FOUNDATION, INC.

**Current Principal Place of Business:**

C/O ROBERT A. AMATO  
2580 S OCEAN BLVD #R2C6  
PALM BCH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ROBERT A. AMATO  
2580 S OCEAN BLVD #R2C6  
PALM BCH, FL 33480

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

SCHEPPS, MITCHELL D ESQ.  
777 S FLAGLER DR STE 600E  
W PALM BCH, FL 33401    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:                      AMATO, ROBERT A  
Address:                      2580 S OCEAN BLVD #R2C6  
City-St-Zip:                      PALM BCH, FL 33480

Title:                      D                      ( ) Delete  
Name:                      AMATO, NANCY L  
Address:                      2580 S OCEAN BLVD #R2C6  
City-St-Zip:                      PALM BCH, FL 33480

Title:                      D                      ( ) Delete  
Name:                      SCHEPPS, MITCHELL D F  
Address:                      777 S FLAGLER DR STE 600E  
City-St-Zip:                      W PALM BCH, FL 33401

**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: ROBERT A AMATO

D

02/07/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date