

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012173

FILED  
Apr 05, 2010  
Secretary of State

**Entity Name:** RICHARD AND MARIANNE STOHLMAN FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

4151 GULF SHORE BLVD NORTH  
APT 1402  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

4151 GULF SHORE BLVD NORTH  
APT 1402  
NAPLES, FL 34102

**New Mailing Address:**

6000 CONWAY ROAD  
BETHESDA, MD 20817

**FEI Number:** 20-8080736

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STOHLMAN, MARIANNE D  
4151 GULF SHORE BLVD NORTH  
APT 1402  
NAPLES, FL 34102 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: P  
Name: STOHLMAN, MARIANNE D  
Address: 4151 GULF SHORE BLVD NORTH - APT 1402  
City-St-Zip: NAPLES, FL 34102

Title: S  
Name: STOHLMAN, RICHARD H JR  
Address: 456 MARLBOROUGH RD  
City-St-Zip: BROOKLYN, NY 11226

Title: T  
Name: STOHLMAN, BARBARA A  
Address: 6000 CONWAY RD  
City-St-Zip: BETHESDA, MD 20817

Title: D  
Name: RUSNAK, CATHERINE S  
Address: 5317 ALBEMARLE RD  
City-St-Zip: BETHESDA, MD 20816

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: BARBARA A. STOHLMAN

T

04/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date