

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2008 8:00 am
Secretary of State

02-07-2008 90016 017 ****61.25

DOCUMENT # N07000005329 1. Entity Name THE PATRICK AND MARY FERRO FOUNDATION, INC.					
Principal Place of Business 6814 SE ISLE WAY STUART FL 33496			Mailing Address 6814 SE ISLE WAY STUART FL 33496		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FBI Number 26-0271538	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERRO, PATRICK 6814 SE ISLE WAY STUART FL 33496				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature is not required when making change.)					
FILE NOW: FEE IS \$61.25 Due By: May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FERRO, PATRICK 6814 SE ISLE WAY STUART FL 33496	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FERRO, MARY 6814 SE ISLE WAY STUART FL 33496	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FERRO, MARC P. 10 W. 16 ST. NEW YORK NY 10011	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LESSIEU, JENNIFER 19 LANCASTER CT. RAMSEY NJ 07446	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TRIPOLITSOTIS, MAREN 70 IROQUOIS RD. STAMFORD CT 06902	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Patrick Ferro 1/30/08 772-225-4578 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					