

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008452

FILED
Jun 26, 2009
Secretary of State

Entity Name: ALLEN AND SHIRLEY SPEISER FOUNDATION, INC.

Current Principal Place of Business:

% BUTZEL LONG, P.C.
125 WORTH AVENUE, SUITE 330
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

% BUTZEL LONG, P.C.
125 WORTH AVENUE, SUITE 330
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 26-0846890 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RAYMOND, JOHN J JR
% BUTZEL LONG, P.C.
125 WORTH AVENUE, SUITE 330
PALM BEACH, FL 33480 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROOKS, STANLEY
Address: % BUTZEL LONG, P.C., 125 WORTH AVE STE 330
City-St-Zip: PALM BEACH, FL 33480

Title: VD () Delete
Name: SPEISER, SHIRLEY
Address: % BUTZEL LONG, P.C., 125 WORTH AVE STE 330
City-St-Zip: PALM BEACH, FL 33480

Title: STD () Delete
Name: BROOKS, PHILLIP N
Address: % BUTZEL LONG, P.C., 125 WORTH AVE STE 330
City-St-Zip: PALM BEACH, FL 33480

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 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: STANLEY BROOKS

PR

06/26/2009

Electronic Signature of Signing Officer or Director

Date