

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011463

FILED
Aug 10, 2009
Secretary of State

Entity Name: THE PAKULA-AXELRAD FAMILY FOUNDATION, INC.

Current Principal Place of Business:

1299 N TAMiami TRAIL UNIT 1024
SARASOTA, FL 34236

New Principal Place of Business:

550 HARBOR COVE CIRCLE
LONGBOAT KEY, FL 34228

Current Mailing Address:

1299 N TAMiami TRAIL UNIT 1024
SARASOTA, FL 34236

New Mailing Address:

550 HARBOR COVE CIRCLE
LONGBOAT KEY, FL 34228

FEI Number: 36-6018850 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:

TROIANO, JEFFREY T
200 SOUTH ORANGE AVE
SARASOTA, FL 34236 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: PTD () Delete
Name: AXELRAD, MILTON
Address: 1299 N TAMiami TRAIL UNIT 1024
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: AXELRAD, BRIAN
Address: 944 WEST CONCORD PLACE, UNIT 2
City-St-Zip: CHICAGO, IL 60614

Title: VSD () Delete
Name: AXELRAD, JAMES
Address: 440 GROVELAND AVE
City-St-Zip: HIGHLAND PARK, IL 60035

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AXELRAD, JAMES
Address: 440 GROVELAND AVE
City-St-Zip: HIGHLAND PARK, IL 60035

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: AXELRAD, MICHAEL
Address: 7 MIDHAMPTON COURT
City-St-Zip: QUOGUE, NY 11953

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: JAMES AXELRAD

D

08/10/2009

Electronic Signature of Signing Officer or Director

Date