

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008935

FILED  
Apr 05, 2011  
Secretary of State

**Entity Name:** NICKI WILLMAN MEMORIAL FUND, INC.

**Current Principal Place of Business:**

6019 SEMINOLE BOULEVARD  
SEMINOLE, FL 33772

**New Principal Place of Business:**

6019 SEMINOLE BOULEVARD  
SEMINOLE, FL 33772

**Current Mailing Address:**

6019 SEMINOLE BOULEVARD  
SEMINOLE, FL 33772

**New Mailing Address:**

6019 SEMINOLE BOULEVARD  
SEMINOLE, FL 33772

**FEI Number:** 27-3411698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ECKSTEIN, PAUL  
6019 SEMINOLE BOULEVARD  
SEMINOLE, FL 33772 US

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

ECKSTEIN, PAUL  
6019 SEMINOLE BOULEVARD  
SEMINOLE, FL 33772 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:

04/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ECKSTEIN, PAUL F  
Address: 329 BATH CLUB BOULEVARD SOUTH  
City-St-Zip: N. REDINGTON BEACH, FL 33708

Title: D  
Name: ECKSTEIN, NGA P  
Address: 329 BATH CLUB BOULEVARD SOUTH  
City-St-Zip: N. REDINGTON BEACH, FL 33708

Title: D  
Name: PALAGANAS, RAFAEL  
Address: 8201 113TH STREET NORTH  
City-St-Zip: SEMINOLE, FL 33772

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: PAUL F ECKSTEIN

D

04/05/2011

Electronic Signature of Signing Officer or Director

Date