2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009964

Entity Name: CAN'T TELL FOUNDATION, INC.

FILED Aug 29, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7280 W. PALMETTO PARK RD., SUITE 203 6501 N FEDERAL HWY BOCA RATON, FL 33433 SUITE 3

BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

7280 W. PALMETTO PARK RD., SUITE 203 6501 N FEDERAL HWY BOCA RATON, FL 33433 SUITE 3

BOCA RATON, FL 33487

FEI Number: 27-3814108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KAPLAN, SHARI B
7280 W. PALMETTO PARK RD., SUITE 203
BOCA RATON, FL 33433 US

KAPLAN, SHARI B
22215 BELLA LAGO DRIVE
UNIT 2116

BOCA RATON, TE 33433 03 BOCA RATON, FL 33433 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: 08/29/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: D

Name: KAPLAN, SHARI B
Address: 22215 BELLA LAGO DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: D

Name: KAPLAN, SANDRA B

Address: 1860 OLD OKEECHOBEE RD., SUITE 506

City-St-Zip: W. PALM BCH, FL 33409

Title: D

Name: LEV, BRUCE Address: P. O. BOX 466

City-St-Zip: GREAT NECK, NY 11022

Title:

Name: PLUMMER, CAROLYN
Address: 235 NE WAVECREST WAY
City-St-Zip: BODA RATON, FL 33432

Title: D

 Name:
 BRANCHINI, STACEY

 Address:
 125 SOUTH FIRST STREET

 City-St-Zip:
 LEWISTON, NY 14092

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: SHARI B. KAPLAN, LCSW D 08/29/2011