

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000010738

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** ARIELLA ROSE LEVINE FOUNDATION TO BENEFIT CHILDREN IN NEED, INC.

**Current Principal Place of Business:**

C/O THE WORTZMAN COMPANY  
3550 LANDER ROAD, SUITE 310  
PEPPER PIKE, OH 44124

**New Principal Place of Business:**

**Current Mailing Address:**

C/O THE WORTZMAN COMPANY  
3550 LANDER ROAD, SUITE 310  
PEPPER PIKE, OH 44124

**New Mailing Address:**

**FEI Number:** 03-0612053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LEVINE, BETH A  
2200 FOREST LANE  
NAPLES, FL 34102 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:** P  
**Name:** WORTZMAN, WILLIAM A CPA  
**Address:** 3550 LANDER ROAD, #310  
**City-St-Zip:** PEPPER PIKE, OH 44124

**Title:** V  
**Name:** LEVINE, BETH A  
**Address:** 2200 FORREST LANE  
**City-St-Zip:** NAPLES, FL 34102

**Title:** ST  
**Name:** LEVINE, RONALD L  
**Address:** 2200 FOREST LANE  
**City-St-Zip:** NAPLES, FL 34102

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:** WILLIAM A. WORTZMAN

P

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date