

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90053 006 \*\*\*\*61.25

DOCUMENT # NT2781

1. Corporation Name

D. & M. FOUNDATION, INC.

Principal Place of Business

190 W Glades Road  
Boca Raton, FL 33432

Mailing Address

190 W. Glades Road  
Boca Raton, FL 33432

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

County

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

12/26/1985

4. FEI Number

59-2613332

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

Vito J. Lupo  
1200 NW Second Avenue  
Boca Raton, FL 33432

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent; and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME Lupo, Vito J.  
STREET ADDRESS 3505 S.Ocean Blvd 3-N  
CITY-ST-ZIP Highland Beach FL

TITLE D ☐ DELETE

NAME Zuker, Harry  
STREET ADDRESS 2895 Timbercreek Cir  
CITY-ST-ZIP Boca Raton, FL

TITLE P ☐ DELETE

NAME Humphreys, Patricia A.  
STREET ADDRESS 22777 S.W. 56 Avenue  
CITY-ST-ZIP Boca Raton, FL

TITLE TD ☐ DELETE

NAME Correll, Dale J.  
STREET ADDRESS 900 N. Federal Hwy S-320  
CITY-ST-ZIP Boca Raton, FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 16435 Brookfield Estates Way  
1.4 CITY-ST-ZIP Delray Beach, FL 33446

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP 33431

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP 33433

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS 5720-G Coach House Circle  
4.4 CITY-ST-ZIP Boca Raton, FL 33486

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

*Vito J. Lupo*

Vito J. Lupo

4/19/99

(561) 395-7410

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)