


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N16664 1. Entity Name THE IRVING & DOROTHY ROM CHARITABLE FOUNDATION, INC.	
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Principal Place of Business 9800 BREAKERS WEST TERRACE WEST PALM BEACH, FL 33411	Mailing Address 9800 BREAKERS WEST TERRACE WEST PALM BEACH, FL 33411
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01172008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2730088	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROM, IRVING 9800 BREAKERS WEST TERRACE WEST PALM BEACH, FL 33411

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Beth D. J. Rom - Rymer X-2-8-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	00000022035 02/19/08-80051-010 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ROM, IRVING 9800 BREAKERS W. TERR. WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROM, DOROTHY 9800 BREAKERS W. TERR. WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS ROM-RYMER, BETH DR. 180 E PEARSON ST CHICAGO, IL 60611
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Beth D. J. Rom - Rymer X-2-8-08 X312-961-1735
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #