2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16664

FILED Apr 05, 2009 Secretary of State

Entity Name: THE IRVING & DOROTHY ROM CHARITABLE FOUNDATION, INC.

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

9800 BREAKERS WEST TERRACE WEST PALM BEACH, FL 33411

Current Mailing Address: New Mailing Address:

9800 BREAKERS WEST TERRACE WEST PALM BEACH, FL 33411

FEI Number: 59-2730088 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:

ROM, IRVING ROM, DOROTHY

9800 BREAKERS WEST TERRACE 9800 BREAKERS WEST TERRACE WEST PALM BEACH, FL 33411 US WEST PALM BEACH, FL 33411 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: DOROTHY ROM 04/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

Name:ROM, IRVING,Name:ROM, DOROTHY,Address:9800 BREAKERS W. TERR.Address:9800 BREAKERS W. TERR.City-St-Zip:WEST PALM BEACH, FLCity-St-Zip:WEST PALM BEACH, FL

Title: D () Delete Title: D (X) Change () Addition Name: ROM, DOROTHY, Name: ROM-RYMER, BETH DR.

Name: ROM, DOROTHY, Name: ROM-RYMER, BETH DR.
Address: 9800 BREAKERS W. TERR. Address: 180 EAST PEARSON STE 3605

City-St-Zip: WEST PALM BEACH, FL City-St-Zip: CHICAGO, IL 60611

Title: DS () Delete Title: D (X) Change () Addition

 Name:
 ROM-RYMER, BETH DR.
 Name:
 ROM-RYMER, SYMI

 Address:
 180 E PEARSON ST
 Address:
 363 7TH STREET APT 1R

 City-St-Zip:
 CHICAGO, IL 60611
 City-St-Zip:
 BROOKLYN, NY 11215

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DR. BETH N. ROM-RYMER D 04/05/2009