## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # N22485

1. Entity Name

THE WALTER AND ADI BLUM FOUNDATION, INC.



FILED Feb 01, 2005 08:00 AM Secretary of State

Principal Place of Business

340 ROYAL PALM WAY

SUITE 100

PALM BEACH, FL 33480-4307 US

Mailing Address

340 ROYAL PALM WAY

SUITE 100

PALM BEACH, FL 33480-4307 US



01052005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 65-0008826 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MURPHY, EUGENE W JR 340 ROYAL PALM WAY SUITE 100 PALM BEACH, FL 33480

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PALM BEACH, FL 33480			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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE					
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Finan     Trust Fund Contribution.	cing -	\$5.00 May Be Added to Fees	
10.	10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAW, NORMAN 5 CANFIELD WAY CONVENT STATION, NJ 07960				02/01/05-80091-023 61.25
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D GAMBILL, SANDRA E 2037 SONORO COURT VISTA, CA 92083				01.00 00001-025 61.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MURPHY, EUGENE W., JR. 340 ROYAL PALM WAY, SUITE 100 PALM BEACH, FL			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. 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 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 there server or trustee empowered to execute this peopre 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, will all other ligreempowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-05 561-655-4060

Date Days