


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

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # N25871 1. Entity Name THE SCHOENBAUM FAMILY FOUNDATION, INC.	
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Principal Place of Business 340 S. PALM AVE #162 SARASOTA, FL 34236 US	Mailing Address 340 S. PALM AVE #162 SARASOTA, FL 34236 US
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DO NOT WRITE IN THIS SPACE



01072008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0043921	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHOENBAUM, BETTY
340 S. PALM AVE, #162
SARASOTA, FL 34236**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOENBAUM, BETTY FRANK 340 S. PALM AVE #162 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOENBAUM, RAYMOND D. 5530 CLAIRE ROSE LN ATLANTA, GA 30327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOENBAUM, JEFFRY F. 2966 EAGLE ESTATES CIRCLE WEST CLEARWATER, FL 34621
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, JOANN SCHOENBAUM 1331 PRESERVATION WAY OLDSMAR, FL 34677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOENBAUM, EMILY 340 S. PALM AVE #162 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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04/25/08-80066-017 61.25

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: Betty Schoenbaum April 9, 2008 9419570381
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #