

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28317

FILED
May 01, 2006
Secretary of State

Entity Name: THE MICHAEL D. AND MARILYN T. WINER FOUNDATION, INC.

Current Principal Place of Business:

4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 334179760

New Principal Place of Business:

Current Mailing Address:

4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 334179760

New Mailing Address:

FEI Number: 65-0086173 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WASCH, MICHELLE
JEWISH FEDERATION OF PLAM BEACH COUNTY INC
4601 COMMUNITY DRIVE
WEST PALM BEACH, FL 33417 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WINER, MICHAEL D.,
Address: 6319 BRANDON STREET
City-St-Zip: PALM BCH GARDENS, FL 334181492

Title: VD () Delete
Name: WINER, MARILYN T.,
Address: 6319 BRANDON STREET
City-St-Zip: PALM BCH GARDENS, FL 334181492

Title: D () Delete
Name: KLEIN, JEFFREY L.,
Address: 7905 TENNYSON CT
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: SIMON, ADELE
Address: 1883 INDIAN ROAD
City-St-Zip: LAKE CLARKE SHORES, FL 33406

Title: SD () Delete
Name: GREEN, BARBARA G.
Address: 300 SEMINOLE AVE
City-St-Zip: PALM BEACH, FL 33480

Title: T () Delete
Name: WASCH, MICHELLE
Address: 4601 COMMUNITY DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHELLE WASCH

T

05/01/2006

Electronic Signature of Signing Officer or Director

Date