2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2007
Secretary of State

DOCUMENT# N28489

Entity Name: ANDY KAPLAN CHILDREN'S FOUNDATION, INC.

Current Principal Place of Business:

1640 ISLAND WAY
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

1640 ISLAND WAY
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 65-0074875 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAPLAN, JEFFREY
1640 ISLAND WAY
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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:	PSD	( ) Delete
Name:	KAPLAN, JEFFREY,	
Address:	1640 ISLAND WAY	
City-St-Zip:	WESTON, FL 33324	
Title:	D	( ) Delete
Name:	KAPLAN, JOEL,	
Address:	10441 NW 17TH STREET	
City-St-Zip:	PLANTATION, FL	
Title:	D	( ) Delete
Name:	WERNER, SHAUN	
Address:	12560 TIMBER PINE TRAIL	
City-St-Zip:	WELLINGTON, FL 33414	
Title:	D	( ) Delete
Name:	WERNER, GWEN	
Address:	12560 TIMBER PINE TRAIL	
City-St-Zip:	WELLINGTON, FL 33414	

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:	

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: JEFFREY KAPLAN PSD 04/07/2007

Electronic Signature of Signing Officer or Director — Date