2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32232

FILED Jan 10, 2005 Secretary of State

Entity Name: THE ELSIE AND MARVIN DEKELBOUM FOUNDATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
APT 502 S	CEAN BLVD. SOUTH ACH, FL 33480)			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1600 N. P.	N H. ORAM ARK AVE., PLA HASE, MD 208				
El Number	: 65-0121068	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
1200 SOU	PORATION SY: ITH PINE ISLA ION, FL 33324	ND ROAD			
	e named entity : e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both	
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
itle: lame: ddress: city-St-Zip:	DVP () HARTSTEIN, G 5101 CORAL C PLANO, TX 75	OVE CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
itle: lame: ddress: city-St-Zip:	DEKELBOUM,	N BLVD., #502 SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
ītle:	DVP () KAPLAN, NEIL 3802 NE 207Th	l ST., #1004	Title: Name: Address: City-St-Zip:	() Change () Addition	
lame: lddress: City-St-Zip:	AVENTURA, FL	33100	Oity-Ot-Zip.		
\ddress:	ŕ	Delete K ALLS DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
ddress: City-St-Zip: Citle: Clame:	DVP () HUGHES, MAR 7904 RIVER FA POTOMAC, MD DS () ORAM, STEVE	Delete K NLLS DR. 20854 Delete N H AVE., PLAZA SOUTH	Title: Name: Address:	() Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BRUNO A. KAELIN III TD 01/10/2005