

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41006

FILED
Feb 06, 2008
Secretary of State

Entity Name: LIL AND YORKE DOLINER CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

230 JOHN ANDERSON DR
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 551260
JACKSONVILLE, FL 32255 US

New Mailing Address:

FEI Number: 59-3038798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNEIDER, MICHAEL N.
5150 BELFORT ROAD
BLDG 100
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

ANSBACHER & SCHNEIDER, PA
5150 BELFORT ROAD
BLDG 100
JACKSONVILLE, FL 32256 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: ANSBACHER & SCHNEIDER, PA 02/06/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DOLINER, JEFFREY
Address: 607 N. BEACH STREET
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD () Delete
Name: HOCKMAN, ALLISON DOLINE
Address: 230 JOHN ANDERSON DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: D () Delete
Name: CONLEY, BARBARA DOLINE
Address: 2 OLD CANYON LANE
City-St-Zip: ORMOND BEACH, FL 32174

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:

I hereby certify that the information supplied with this filing does not qualify 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 DOLINER P 02/06/2008

Electronic Signature of Signing Officer or Director Date