


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00-AM
Secretary of State

| | |
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| DOCUMENT # N41427 1. Entity Name WEINBERGER FAMILY FOUNDATION, INC. |  |
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| Principal Place of Business 4469 WHITE CEDAR LN DELRAY BEACH, FL 33445 | Mailing Address 4469 WHITE CEDAR LN DELRAY BEACH, FL 33445 |
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03302006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

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|---|-----------------------------------|
| 4. FEI Number 65-0245748 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent DONOFF, CRAIG 6100 GLADES RD SUITE 204 BOCA RATON, FL 33434 |
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WEINBERGER, SAUL 4469 WHITE CEDAR LN DELRAY BEACH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WEINBERGER, RUTH 4469 WHITE CEDAR LN DELRAY BEACH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WEINBERGER, MICHAEL 4469 WHITE CEDAR LN DELRAY BEACH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

U00000508629
04/28/06-80011-003 61.25

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IN THIS SPACE**

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: X *Saul Weinberger*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-06
Date

Daytime Phone # _____