## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N42898

(9)

IRENE SACKS KORNHAUSER CHARITABLE FOUNDATION, IN  $\mathbf{C}$ .

Principal Place of Business Mailing Address  4601 COMMUNITY DRIVE 4601 COMMUNITY DRIVE					1 19911197 911 91919 11991 12118 1	Dr. Br. C. Br. Br. Br. Br. Br. Br. Br. Br. Br. Br	ı Albii Albii Biğii (AB)
WEST PALM	BEACH FL 33401	WEST PALM BEACH I					
					<ol> <li>Date Incorporated or Qualified</li> <li>04/08/1991</li> </ol>		Last Report 30/1995
	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite Ant	# atc	Suite, Apt. #, etc.			65-0253203		Not Applicable
Suite, Apt. #, etc. 27		<del></del>			5. Certificate of Status Desired		<b>8.75</b> Additional Fee Required
City & State	9	City & State			6. Election Campaign Financing		5.00 May Be
<b>23</b> Zip	Country	28 Zip	Countr		Trust Fund Contribution		Added to Fees
24	25	29	30	,	This corporation has liability for Florida Statutes	r intangible tax und Yes 🛂 No	der s. 199.032,
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New	Registered Agen	it
			8	Name E	Sugene Philips		
Baker,	EDWARD		8:	2 Street Au	eweshowederstaon	bof Palm	Beach
4601 COMMUNITY DRIVE				County, Inc.			
SUITE 305			6:		601 Community Dr	ive	
WEST F	PALM BEACH FL 33401		8-	T 0.	West Palm Beach	FL 85	Zp.Code 33417
11. Pursuant	to the provisions of Sections 617.0502	2 and 617 1508. Florida Statu	tes the above			FL	33417
or register	red agent, or both, in the State of Flori	da. Such change was authori.	zed by the cor	poration's bo	oration submits this statement for the p lard of directors. Thereby accept the ap	pointment as regis	tered agent. I am
	in, and accept the obligations bit, sect	ion 617.0503, Fionda Statute	S.			10/116	
SIGNATURE	Signature, typed by finited rish a of register's Lagariti	and this it apple able (N	OTE Registered Ag	ent signature requi	red when reinstating		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO O	FICERS AND DIRI	ECTORS IN 12
TITLE	PD	DELETE	1 1 THILE			□ Ch.	ange Addition
NAME	LIST, CYNTHIA S.,		1.2 NAME				
STHEET ADDRESS	254 TRADEWIND DRIVE		1 3 STHE	FF ADDRESS			
CITY-ST-ZIP	PALM BEACH FL		1.4 CHY	ST-ZIP			
TITLE	<b>VD</b> □DELETE		2 1 TiTLE			Ch.	ange 🔲 Addition
NAM:	LIST, ROBERT E.		2.2 NAME				
STREET ADDRESS	254 TRADEWIND DRIVE		2 3 STRE	SZAROCA 13			
CITY-ST-ZIP	PALM BEACH FL	Deciese	2 4 CITY				
TIFLE	D COECAL BADDADA	DELETE	3 1 TOTLE		Ch		ange 🔲 Addition
NAME REDECT ADDROSES	GREEN, BARBARA 400 NORTH FLAGLER DRIVE	<u>.</u>	3 2 NAME				
STREET ADDRESS	WEST PALM BEACH FL			ET ADDRESS			
TITLE	D D	DELETE	3 4. CITY 4 1 TITLE				ange
NAME	BLONDER, ERWIN H.		4 1 MAM			الله الله	ango Li Addition
STREET ADDRESS	241 WEST INDIES DRIVE			ET ADORESS			
CiTY-S1-ZiP	PALM BEACH FL		4.4 CITY				
TITLE	SD	DELETE	5.1 TITLE		en en	X) Ch	ange Addition
NAME	ENGELSTEIN, ALEC		5.2 NAME		SD Filoop Bower	_	
STREET ADDRESS	6611 S. FLAGLER DRIVE		5 3 STRE		Eileen Berman		
CITY - ST - ZIP	WEST PALM BEACH FL		5 4 CITY		13170 Crisa Drive		33410
TITLE	T	X DELETE	61 TITLE		Palm Beach Garder	ıs, FL <sub>[XCh</sub>	ange 🔲 Addition
NAME	BAKER, EDWARD		6.2 NAME	r	י	_ <del>-</del>	
STREET ADDRESS	2380 SARATOGA BAY DRIVE		63 STRE		Sugene Philips		
CITY - ST - ZIP	WEST PALM BCH FL		6.4 CITY	- \$1 - ZIP	27 Root Trail, P	alm Beac	h,FL 3348
<ol> <li>14. I do heret certify that</li> </ol>	by certify that the information supplied it the information indicated on this annual	with this filing is voluntarily fur ual report or supplemental an	nished and do	es not qualify	for the exemption stated in Section 11 rate and that my signature shall have the	9.07(3)(k), Florida S	Statutes. I further
oath; that	I am an officer or director of the corpo	oration of the receiver or trust	ee empowered	to execute t	his report as required by Chapter 617,	Florida Statutes; ar	nd that my name
appears i	IT DIOCK 12 OF BLOCK 13 II CHAMBED, OF	on ay agacriment with an add	# <del>e</del> 55.		1-10-		_
		m = 1 = 1			3 1 - 7 / / /		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED AME OF SIGNING OFFICER OR DIRECTOR

407-478-0700)