

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JAN 27 PM 2:34

DOCUMENT # N46117

1. Entity Name
"THE LITTLE GUY FOUNDATION", IN MEMORY OF
JUDITH AND NORMAN NEWMAN, INC.



Principal Place of Business
FLACKMAN GOOMAN & POTTER
P.O. BOX 419
RIDGEWOOD, NJ 07451-0419

Mailing Address
MRS. NEWMAN
3 HORIZON ROAD
FORT LEE, NJ 07024

DO NOT WRITE IN THIS SPACE



01182006 No Chg-NP CR2E037 (11/05)

4. FEI Number
58-2001454

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAPITAL CONNECTION, INC.
417 E. VIRGINIA STREET
STE. 1
TALLAHASSEE, FL 32301

**DO NOT WRITE
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	CVPD NEWMAN, J MRS 3 HORIZON ROAD FORT LEE, NJ 07024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLUNKETT, CHRISTOPHER 106 PROSPECT ST, (FLACKMAN GOODMAN & POTTER RIDGEWOOD, NJ 074510419
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FENZEL, JERRY 6721 TULIP HILL TERRACE BETHESOA, MD 20816
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PSICHOS, ADAM G BESSEMER TRUST CO 630 5TH AVE NEW YORK, NY 10111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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**DO NOT WRITE
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:

AC Newman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

20 January 2006 601-224-6731
Date Daytime Phone #