

FILED
Jun 27, 2001 8:00 am
Secretary of State

06-27-2001 90007 047 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46201
 1. Entity Name CA

LENORE & HAROLD LARKIN PHILANTHROPIC FUND, INC.
 Principal Place of Business Mailing Address
 1400 S. OCEAN BLVD. #N-1405
 BOCA RATON, FL 33432

00075104

2. Principal Place of Business
 SAME
 Suite, Apt. #, etc.

3. Mailing Address
 Same
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

4. FEI Number
 65-0310975
 Applied For
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent
 Andrew R. Spector, Esq.
 150 West Flagler Street
 Suite 2701
 Miami, Florida 33130

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.
 SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW:
FEE IS \$61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT HAROLD LARKIN 1400 S. OCEAN BLVD. BOCA RATON, FL 33432 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE PRESIDENT LENORE LARKIN 1400 S. OCEAN BLVD. BOCA RATON, FL 33432 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY ANDREW R. SPECTOR 44 WEST FLAGLER STREET MIAMI, FL 33130 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREASURER SUSAN LARKIN 54 HILLCREST DRIVE WESTON, MA 02193 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREASURER ANDREW J. LARKIN 23 TUBWRECK DRIVE DOVER, MA 02030 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Andrew R. Spector 150 West Flagler Street, Suite 2701 Miami, Florida 33130 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Harold Larkin **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**
 Date 5-15-01 Daytime Phone # 394-6075

CR2E037 (11/00)



Attachment
A0075104

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 31, 2001

LENORE AND HAROLD LARKIN PHILANTHROPIC FOUNDATION, INC.
1400 S. OCEAN BLVD
BOCA RATON, FL 33432 US

SUBJECT: LENORE AND HAROLD LARKIN PHILANTHROPIC FOUNDATION,
INC.

Ref. Number: N46201

We have received your check(s) totaling \$61.25; however it cannot be processed and is being returned for the following:

There is not a registered agent designated on the report. Please enter the current registered agent's name and Florida street address. If this is a change from the registered agent previously filed with this office, the new agent must sign accepting the designation.

A non-profit corporation must list three (3) directors or (3) trustees and their street addresses in block 10 or 11. Use a "D" or "T" to designate the title.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Sean Toner
Senior Section Administrator

Letter Number: 201A00033054

ANDREW
DUNN MOYSE
-LWYR MD PERS
SAYS
44 W. FLAGLER
HAROLD LARKIN

5/31/01