2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N46201

FILED Apr 26, 2002 8:00 AM Secretary of State

Entity Name: LENORE AND HAROLD LARKIN PHILANTHROPIC FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1400 S. OCEAN BLVD. #N1405 BOCA RATON, FL 33432 **New Mailing Address: Current Mailing Address:** 1400 S. OCEAN BLVD. #N1405 BOCA RATON, FL 33432 US FEI Number: 65-0310975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPECTOR, ANDREW R. 150 W FLAGLER ST STE 2701 MIAMI, FL 33130 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition LARKIN, LENORE, LARKIN, LENORE Name: Name: 1400 S. OCEAN BLVD. Address: 1400 S. OCEAN BLVD. Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 Title: PD () Delete Title: (X) Change () Addition LARKIN, HAROLD, Name: LARKIN, HAROLD Name: Address: 1400 S. OCEAN BLVD. Address: 1400 S. OCEAN BLVD. City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 Title: () Delete Title: (X) Change () Addition LARKIN, SUSAN, LARKIN, SUSAN Name: Name: 54 HILLCREST Address: Address: 54 HILLCREST City-St-Zip: WESTON, MA 02193 City-St-Zip: WESTON, MA 02193 Title: SD Title: SD (X) Change () Addition () Delete Name: SPECTOR, ANDREW R. Name: SPECTOR, ANDREW R 150 WEST FLAGLER STREET, SUITE 2701 Address: Address: 150 WEST FLAGLER STREET, SUITE 2701 City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33130 Title: () Delete Title: () Change () Addition LARKIN, ANDREW J Name: Name: 23 TUBWRECK DRIVE Address: Address: DOVER, MA 02030 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDREW R. SPECTOR SD 04/26/2002