

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:

1400 S. OCEAN BLVD.
#N1405
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1400 S. OCEAN BLVD.
#N1405
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 65-0310975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPECTOR, ANDREW R.
150 W FLAGLER ST
STE 2701
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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:

Title: VP () Delete
Name: LARKIN, LENORE,
Address: 1400 S. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33432

Title: PD () Delete
Name: LARKIN, HAROLD,
Address: 1400 S. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33432

Title: TD () Delete
Name: LARKIN, SUSAN,
Address: 54 HILLCREST
City-St-Zip: WESTON, MA 02193

Title: SD () Delete
Name: SPECTOR, ANDREW R.,
Address: 150 WEST FLAGLER STREET, SUITE 2701
City-St-Zip: MIAMI, FL 33130

Title: TD () Delete
Name: LARKIN, ANDREW J
Address: 23 TUBWRECK DRIVE
City-St-Zip: DOVER, MA 02030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: LARKIN, LENORE
Address: 1400 S. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33432

Title: PD (X) Change () Addition
Name: LARKIN, HAROLD
Address: 1400 S. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33432

Title: TD (X) Change () Addition
Name: LARKIN, SUSAN
Address: 54 HILLCREST
City-St-Zip: WESTON, MA 02193

Title: SD (X) Change () Addition
Name: SPECTOR, ANDREW R
Address: 150 WEST FLAGLER STREET, SUITE 2701
City-St-Zip: MIAMI, FL 33130

Title: () Change () Addition
Name:
Address:
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

Electronic Signature of Signing Officer or Director

Date