

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46314

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** THE JOANNE HEARST LAWRENCE FOUNDATION, INC.

**Current Principal Place of Business:**

C/O TOM C. KLEIN 450 SEVENTH AVE  
SUITE 1109  
NEW YORK, NY 10123

**New Principal Place of Business:**

**Current Mailing Address:**

C/O TOM C. KLEIN 450 SEVENTH AVE  
SUITE 1109  
NEW YORK, NY 10123

**New Mailing Address:**

**FEI Number:** 65-0331600

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLUM, SAMUEL ESQ.  
2666 TIGERTAIL AVE STE 106  
COCONUT GROVE, FL 33133 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: DP  
Name: LAWRENCE, JOANNE HEARST  
Address: 1508 EAST 31ST ST  
City-St-Zip: TULSA, OK 74105

Title: D  
Name: KLEIN, TOM C CPA  
Address: 450 SEVENTH AVENUE  
City-St-Zip: NEW YORK, NY 10123

Title: D  
Name: GAY, DEBORAH HEARST  
Address: PO BOX 1516  
City-St-Zip: SOUTH HAMPTON, NY 11969

I hereby 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 all other like empowered.

SIGNATURE: JOANNE HEARST LAWRENCE

DP

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date