		PLEAS	E READ	<u>ALL INST</u>	PUCTY	<u> NS</u>	BEFORE C	OMPLETI	NG THÌS FO		1	
APPLICATION FLORI A DE AFIME TO DEST TE								FILED				
REIM		MENI		Dr	SECRET	y S	RATIONS		99 OCT 19 /	IH 11:	12	
DOCUMENT # N48271							P. C. C.	TALLAHASSEE, PLORIDA				
1. Corporation Name												
FARBER FAMILY FOUNDATION, INC.												
Principal Place of Business Mailing Address												
3056 MIRO DRIVE NORTH 1845 WAI PALM BEACH GARDENS FL 33410 STE 800 PHILADEL US					NUT STR PHIA PA 19103							
If above addresses are incorrect in any way, line through incorrect information and enter correction below. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable								A Date incorporated or Qualified				
Suite, Apt.	#, etc.		Sulte, Apt. #,	etc.			Date Incorporated or Qualified To Do Business in Florida O4/06/1992					
City & State				City & State				I 65_∩??6?62			Applied F	
Zip	Zip Country				Zip Country			6. CERTIFICATE OF STATUS DESIRED S8 75. A little condition of for a Certificate of States.				garead.
7. Names a		Each Officer and/	or Director (Flor	ride nonprofit corporations must list at le Street Address of Each			· · · · · · · · · · · · · · · · · · ·					
Title(s)					Officer and/or Director			City / State / Zip				
D	FARBER, JACK				3056 MIRO DRIVE NORTH				PALM BEACH FL			
D	D FARBER, VIVIAN				3056 MIRO DRIVE NORTH				PALM BEACH FL			
D	FARBER, DAVID M.					1228 BARROWDALE ROAD			RYDAL PA			
D	KURTZMAN, ELLEN B				1243 BOBARN DRIVE				PENN VALLEY PA			
							900003032039					
									-11/02/9301037018 *****61.25 *****61.25			
8. Name and Address of Current Registered Agent								9. Name and A	ddress of New Regis	tered A	gent	
FARBER, JACK							Name N/A					66.60
3056 MIRO DRIVE NORTH						Street Address (P.O. Box Number is Not Acceptable)						CPZEO46
PALM BEACH GARDENS FL 33410					Suite, Apt. #, Etc							8
10. I. being appointed the registered agent of the above named corporation, am familiar] FL]				Zip Code	
		e registered	agent of the abo	ve named corpo				bligations of Section	on 607.0505, F.S.			
Signature of Registered Agent Date REGISTERED AGENT MUST SIGN												
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under onth.												
SIGNAT			fact 3	au				-Presiden	10/13/99) 569-9900	
		IGNATURE A	NO TYPED OR PRI	NTED NAME OF 8	IGNING OFFK	CER OR D	HRECTOR		Date	Day	time Phone #	

FARBER FAMILY FOUNDATION, INC.

3056 MIRO DRIVE NORTH PALM BEACH GARDENS, FL 33410

(407) 627-1630

JACK FARBER
PRESIDENT
VIVIAN FARBER
VICE PRESIDENT AND SECRETARY
ELLEN B. KURTZMAN
VICE PRESIDENT AND TREASURER

April 26, 1999

Florida Department of State Division of Corporations Annual Reports Filings P O Box 1500 Tallahassee, FL 32302-1500

Re:

Farber Family Foundation, Inc.

F.E.I. # 65-0336266

Florida Document # N48271

1999 Annual Report

Gentlemen:

Enclosed is the 1999 Annual Report for the above Non-Profit Private Foundation, together with a check in the amount of \$61.25 in payment of the filing fee due.

Previously Sout

Very truly yours,

James M. Mulderrig

Director - Corporate Taxes

JMM/rs
Enclosures
Certified Mail Receipt # Z 071 639 222