

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N50382

(3)

1. Corporation Name

THE COOPER FAMILY FOUNDATION, INC.



Principal Place of Business

Mailing Address

C/O VANOUTRYVE SECURITIES CORP.  
50 W. 34TH ST., SUITE 22-A-8  
NEW YORK NY 10001

C/O VANOUTRYVE SECURITIES CORP.  
50 W. 34TH ST., SUITE 22-A-8  
NEW YORK NY 10001

3. Date Incorporated or Qualified  
08/14/1992

4. Date of Last Report  
07/03/1995

4. FEI Number

APPLIED FOR 65-0354458

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

GART, DAVID A  
C/O SHUTTS & BOWEN  
250 AUSTRALIAN AVE., S., SUITE 500  
WEST PALM BEACH FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES

TITLE PTD  
NAME COOPER, DONALD  
STREET ADDRESS 2100 BUS ISLE RD, APT 5  
CITY-ST-ZIP BOCA RATON FL

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 800 South Ocean Boulevard  
1.4 CITY-ST-ZIP Boca Raton, FL 33432

XX Change Addition

TITLE SD  
NAME COOPER, FAY  
STREET ADDRESS 2100 BUS ISLE RD, APT 5  
CITY-ST-ZIP BOCA RATON FL

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 800 South Ocean Boulevard  
2.4 CITY-ST-ZIP Boca Raton, FL 33432

XX Change Addition

TITLE D  
NAME COOPER, RICHARD  
STREET ADDRESS 1800 S OCEAN BLVD., APT 4B  
CITY-ST-ZIP BOCA RATON FL

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS 100001735671  
3.4 CITY-ST-ZIP -03/07/96--01068--017  
\*\*\*61.25

Change Addition

TITLE D  
NAME COOPER, ARLENE  
STREET ADDRESS 6 WEST 77TH STREET, APT. 6B  
CITY-ST-ZIP NEW YORK NY 10024

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Donald Cooper

Donald Cooper 2/27/96

212 695-2471