FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State 1998 DIVISION OF CORPORATIONS N93000000961 (3) DOCUMENT # THE HADAR FOUNDATION, INC. Principal Place of Business Mailing Address 3080 N COURSE DR 101.51 955 FIFTH AVE 3. Date Incorporated or Qualified POMPANO BEACH FL 33069 NEW YORK NY 10021 02/25/1993 4. FEI Number Applied For <u>13-3721350</u> Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired П 21 26 Fee Required Suite, Apl. #, etc. Suite, Apt. #, etc. \$5.00 May Be Election Campaign Financing 22 **Trust Fund Contribution** Added to Fees 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes M2-No 28 Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 30 Personal Property Tax due June 30. Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD 83 **PLANTATION FL 33324** 64 City Zip Code 11. 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change ☐ Addition TITLE 1.1 TITLE NAME HADAR, MARGERY R 12 NAME 315 E 69TH ST APT 12D STREET ADDRESS 1.3 STREET ADDRESS New York ny 10021 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE HADAR, RICHARD A 2.2 NAME NAME 315 E 69TH ST APT 12D STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK NY 10021** 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 3.1 TITLE Change ☐ Addition NAME HADAR, JOSHUA A 3.2 NAME STREET ADDRESS 315 E 69TH ST APT 2M 3.3 STREET ADDRESS **NEW YORK NY 10021** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE HADAR, ERIC D 4 2 NAME NAME 181 E 73RD ST PHC STREET ADDRESS 4.3 STREET ADDRESS NEW YORK NY 10021 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

FILED

May 22 1998 8:00am