FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300004318 (2)

THE LISA AND ROGER GLADSTONE FAMILY FOUNDATION, INC.

Principal Place of Business Mailing Address %433 PLAZA REAL %433 PLAZA REAL 3. Date Incorporated or Qualified MIZNER PARK, SUITE 245 MIZNER PARK. SUITE 245 09/24/1993 **BOCA RATON FL 33432** BOCA RATON FL 33432 4. FEI Number Applied For Not Applicable 65-0340354 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired П 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No 23 28 Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GLADSTONE, ROGER Street Address (P.O. Box Number is Not Acceptable) %433 PLAZA REAL 83 MIZNER PARK, SUITE 245 **BOCA RATON FL 33432** 84 City 185 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition 1.1 TITLE TITLE D DELETE NAME CARL E. SIEGEL 1.2 NAME 5355 TOWN CENTER RD., STE 80 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ___ Change TITLE 2.1 TITLE GLADSTONE, LISA 2.2 NAME 433 PLAZA REAL, SUITE 245 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME MARION CHASE NAME 3.3 STREET ADDRESS 433 PLAZA REAL, STE 245 STREET ADDRESS **BOCA RATON FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME

Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: MARION CHASE 1/12/98 561-362-934

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 incicated 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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

.