

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004636

FILED
Apr 29, 2005
Secretary of State

Entity Name: CURTIS FAMILY FOUNDATION, INC.

Current Principal Place of Business:

PO BOX 3302
PALM BCH, FL 33480 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3302
PALM BCH, FL 33480 US

New Mailing Address:

FEI Number: 65-0441571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURTIS, ALAN
720 S OCEAN BLVD
PALM BEACH, FL 33480 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: D () Delete
Name: CURTIS, ALAN
Address: 720 S OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: CURTIS, CHRISTINE W
Address: 720 S OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: CURTIS, LINDA
Address: 983 OLD POST ROAD
City-St-Zip: NEW PALTZ, NY 12561

Title: D () Delete
Name: CURTIS, ROBERTA
Address: 16 HUDSON ST
City-St-Zip: NEW YORK, NY 10013

Title: D () Delete
Name: GINSBERG, MARK
Address: 16 HUDSON ST
City-St-Zip: NEW YORK, NY 10013

Title: D () Delete
Name: CURTIS, BRYAN
Address: 142 GATE SCHOOLHOUSE ROAD
City-St-Zip: NEW HAMPTON, NY 10958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CURTIS, BRYAN
Address: 4519 E. CLOUDBURST COURT
City-St-Zip: GILBERT, AZ 85297

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALAN CURTIS

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date