2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# N93000004636

Entity Name: CURTIS FAMILY FOUNDATION, INC.

Current Principal Place of Business:

PO BOX 3302
PALM BCH, FL 33480 US

New Principal Place of Business:

720 SOUTH OCEAN BLVD.
PALM BCH, FL 33480 US

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 (X)**

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:	4519 E. CLOUDBURST COURT	
City-St-Zip:	GILBERT, AZ 85297	

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 01/08/2009
Electronic Signature of Signing Officer or Director Date