

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000005634

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** KATZEN FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

3155 HARBOR BLVD  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

3155 HARBOR BLVD  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

**FEI Number:** 65-0452246

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KATZEN, MELVYN J MGR  
3155 HARBOR BLVD  
PORT CHARLOTTE, FL 33952 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: MGR  
Name: KATZEN, MELVYN MGR  
Address: 3155 HARBOR BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D  
Name: KATZEN, JILLIAN A  
Address: 77 TROPICANA DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

I hereby 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 all other like empowered.

SIGNATURE: MELVYN J KATZEN MD

MGR

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date