

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004021

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Entity Name:** FA BENE FOUNDATION, INC.

**Current Principal Place of Business:**

151 CRANDON BLVD  
APT 925  
KEY BISCAYNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

151 CRANDON BLVD  
APT 925  
KEY BISCAYNE, FL 33149 US

**New Mailing Address:**

**FEI Number:** 65-0523860      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WATKINS, JOCELYN H K  
151 CRANDON BLVD  
APT 925  
KEY BISCAYNE, FL 33149 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:** PST  
**Name:** WATKINS, JOCELYN H K  
**Address:** 151 CRANDON BLVD, APT 925  
**City-St-Zip:** KEY BISCAYNE, FL 33149 US

**Title:** VD  
**Name:** ROSSMAN, STEPHEN ESQ.  
**Address:** 44 WEST FLAGLER ST.  
**City-St-Zip:** MIAMI, FL 33130 US

**Title:** D  
**Name:** YING, WENDELL A  
**Address:** 2428 TOWNE BLVD  
**City-St-Zip:** OAKVILLE, ON L6H 5X6 CA

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: JOCELYN H K WATKINS

PST

02/25/2011

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

\_\_\_\_\_  
Date