

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006326

FILED
Feb 06, 2009
Secretary of State

Entity Name: BURTON & BEATRICE DERMER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

1180 S OCEAN BLVD APT 8E
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1180 S OCEAN BLVD APT 8E
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-0551008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DERMER, BURTON
1180 S OCEAN BLVD APT 8E
BOCA RATON, FL 33432 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: DERMER, BURTON
Address: 1180 S OCEAN BLVD 8E
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: DERMER, BEATRICE
Address: 1180 S OCEAN BLVD 8E
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: DERMER, MICHAEL
Address: 336 LEXINGTON AVE
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: DERMER, DANIEL
Address: 140 E 52ND ST APT 3F
City-St-Zip: NEW YORK, NY 10022

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:

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: BEATRICE DERMER

PRES

02/06/2009

Electronic Signature of Signing Officer or Director

Date