

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90432 048 ****61.25

DOCUMENT # N95000000442

1. Entity Name
George & Ida Mestel Foundation ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
13909 LeHavre Drive

3. Mailing Address
116 Cleveland Ave. NW
Suite, Apt. #, etc.
Suite 525

DO NOT WRITE IN THIS SPACE

City & State
Palm Beach Gardens, FL

City & State
Canton, OH

4. FEI Number:
65-0559509

Applied For
Not Applicable

Zip
33410

Country
USA

Zip
44702

Country
USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Harry Mestel

Street Address (P.O. Box Number is Not Acceptable)
13909 LeHavre Drive

City Palm Beach Gardens FL Zip Code 33410

8. 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 Harry Mestel

DATE 4/29/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DPT
NAME Harry Mestel
STREET ADDRESS 13909 LeHavre Drive
CITY-ST-ZIP Palm Beach Gardens, FL 33410

TITLE DS
NAME Elaine Rich
STREET ADDRESS 301 W. 57th St., Apt. 15C
CITY-ST-ZIP New York, NY 10019

TITLE D
NAME Stanley Mestel
STREET ADDRESS 579 Flanders Drive
CITY-ST-ZIP North Woodmere, NY 11581

TITLE
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STREET ADDRESS
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Harry Mestel

DATE 4/29/02