

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000797

FILED
Feb 04, 2004
Secretary of State**Entity Name:** JERI LOUISE WAXENBERG FOUNDATION, INC.**Current Principal Place of Business:**11111 BISCAYNE BLVD.
SUITE 306
MIAMI, FL 33161**New Principal Place of Business:****Current Mailing Address:**PO BOX 1680
SUN VALLEY, ID 83353 US**New Mailing Address:****FEI Number:** 58-2169008**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BENFORD, NORMAN J
1221 BRICKELL AVE.
21ST FLOOR
MIAMI, FL 33131 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: WAXENBERG, JACK
Address: 11111 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL**Title:** D () Delete
Name: SCHMIDT, MICHAEL
Address: PMB 176 6017 PINE RIDGE ROAD #176
City-St-Zip: NAPLES, FL 34119**Title:** D () Delete
Name: WAXENBERG, JERI
Address: P.O. BOX 1680
City-St-Zip: SUN VALLEY, ID**Title:** () Delete
Name:
Address:
City-St-Zip:**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:** D () Change (X) Addition
Name: WOLFORD, SUSAN
Address: 1534 VALLEY DRIVE
City-St-Zip: TOPANGA, CA 90290

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JERI WAXENBERG

D

02/04/2004

Electronic Signature of Signing Officer or Director

Date