

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001079

FILED
Apr 05, 2008
Secretary of State

Entity Name: PHILIP M. SCHWARTZ AND LEE G. SCHWARTZ PHILANTHROPIC FOUNDATION, INC.

Current Principal Place of Business:

13356 - 88TH AVE N
SEMINOLE, FL 33776

New Principal Place of Business:

1117-A BEN FRANKLIN DRIVE
SARASOTA, FL 34236

Current Mailing Address:

13356-88 AVE N
SEMINOLE, FL 33776

New Mailing Address:

1117-A BEN FRANKLIN DRIVE
SARASOTA, FL 34236

FEI Number: 31-1465773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARGER, BRUCE ESQUIRE
360 CENTRAL AVENUE
SUITE 1500
ST. PETERSBURG, FL 33701 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: TD () Delete
Name: LIPMAN, ELAINE
Address: 7980 LISA DAWN AVE
City-St-Zip: LAS VEGAS, NV 89117

Title: PD () Delete
Name: BINDERMAN, MAUREEN
Address: 1117-A BEN FRANKLIN DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: VSD () Delete
Name: BORNSTEIN, BILLIE SUE
Address: 13356 - 88TH AVENUE
City-St-Zip: SEMINOLE, FL 34646

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: LIPMAN, ELAINE
Address: 2916 HAWKSDALE DR
City-St-Zip: LAS VEGAS, NV 89134

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: MAUREEN SCHWARTZ BINDERMAN

PRES

04/05/2008

Electronic Signature of Signing Officer or Director

Date