

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002267

FILED
Feb 01, 2006
Secretary of State

Entity Name: EGAN FAMILY FOUNDATION, INC.

Current Principal Place of Business:

110 E. BROWARD BLVD.
SUITE 1400
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 029006
FT. LAUDERDALE, FL 33302 US

New Mailing Address:

FEI Number: 65-0735873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, DENNIS D
110 S.E. 6TH ST.
28TH FLOOR
FT. LAUDERDALE, FL 33301 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: VPD () Delete
Name: EGAN, S J
Address: 110 E. BROWARD BLVD., STE 1400
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VPTS () Delete
Name: LEBOWITZ, ROBIN S
Address: 110 E. BROWARD BLVD., STE 1400
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: PD () Delete
Name: EGAN, MICHAEL S
Address: 110 E. BROWARD BLVD., STE 1400
City-St-Zip: FORT LAUDERDALE, FL 33301

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBIN S. LEBOWITZ

VPTS

02/01/2006

Electronic Signature of Signing Officer or Director

Date