

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003079

FILED
Mar 13, 2007
Secretary of State

Entity Name: THE TRIESTER FOUNDATION, INC.

Current Principal Place of Business:

1860 FOREST HILL BLVD STE 200
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

111 PRESIDENTIAL BLVD
STE 230
BALA CYNWYD, PA 19004

New Mailing Address:

FEI Number: 59-3264585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIESTER, STANTON L
1860 FOREST HILL BLVD STE 200
WEST PALM BEACH, FL 33406 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: DPT () Delete
Name: TRIESTER, STANTON L
Address: 1860 FOREST HILL BLVD STE 200
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DV () Delete
Name: TRIESTER, SONIA C
Address: 1860 FOREST HILL BLVD STE 200
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DS () Delete
Name: OBRIEN, KARIN E
Address: 610 VIA DE LA PAZ
City-St-Zip: PACIFIC PALISADES, CA 90272

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: TRIESTER, STANTON L
Address: 1860 FOREST HILL BLVD STE 200
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: DV (X) Change () Addition
Name: TRIESTER, SONIA C
Address: 1860 FOREST HILL BLVD STE 200
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: DS (X) Change () Addition
Name: OBRIEN, KARIN E
Address: 610 VIA DE LA PAZ
City-St-Zip: PACIFIC PALISADES, CA 90272 US

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: STANTON L. TRIESTER

PRES

03/13/2007

Electronic Signature of Signing Officer or Director

Date