

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003079

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: THE TRIESTER FOUNDATION, INC.

## Current Principal Place of Business:

1860 FOREST HILL BLVD.  
SUITE 200  
WEST PALM BEACH, FL 33406

## Current Mailing Address:

111 PRESIDENTIAL BLVD  
STE 230  
BALA CYNWYD, PA 19004

## New Principal Place of Business:

1860 FOREST HILL BLVD.  
SUITE 200  
WEST PALM BEACH, FL 33406 US

## New Mailing Address:

111 PRESIDENTIAL BLVD  
STE 230  
BALA CYNWYD, PA 19004 US

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.  
SUITE 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 US

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

Title: DS ( ) Delete  
Name: OBRIEN, KARIN E  
Address: 111 LORING AVENUE  
City-St-Zip: PELHAM, NY 10803 US

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: AS ( ) Change (X) Addition  
Name: NORSWORTHY, JEAN A  
Address: 111 PRESIDENTIAL BLVD., SUITE 230  
City-St-Zip: BALA CYNWYD, PA 19004 US

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: JEAN NORSWORTHY

AS

03/31/2009

Electronic Signature of Signing Officer or Director

Date