

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003319

FILED
Apr 07, 2009
Secretary of State

Entity Name: THE WEILER FOUNDATION, INC.

Current Principal Place of Business:

231 BRADLEY PLACE
SUITE 204
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

231 BRADLEY PLACE
SUITE 204
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 31-1475728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENGELBERG, MORRIS
4040 SHERIDAN ST.
HOLLYWOOD, FL 33021 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: DP () Delete
Name: BURNAP, BARTLETT
Address: 231 BRADLEY PLACE STE 204
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: BURNAP, CHRISTIANE
Address: 1539 NW DAVENPORT AVENUE
City-St-Zip: BEND, OR 97701

Title: D () Delete
Name: BULLIS, WILLIAM
Address: 11999 SAN VINCENTE BLVD., STE. 220
City-St-Zip: LOS ANGELES, CA 90049

Title: D () Delete
Name: BURNAP, LAN
Address: 854 NORTH STANLEY AVENUE
City-St-Zip: LOS ANGELES, CA 90046

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: () 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: BARTLETT BURNAP

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date