

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N96000005456</b>	
1. Entity Name THE LEONARD SCHNURMACHER FOUNDATION, INC.	



Principal Place of Business 12280 NW 4TH ST PLANTATION, FL 33325-2424 US	Mailing Address 12280 NW 4TH ST PLANTATION, FL 33325-2424 US
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04052008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1127763	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  REISS, GERALD CPA 4000 HOLLYWOOD BOULEVARD 215 SOUTH HOLLYWOOD, FL 33021	
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**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHNURMACHER, LEONARD M 12280 NW 4TH ST PLANTATION, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLECHER, JILL 6 KINDRED LANE BELLE MEAD, NJ 085024301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHNURMACHER, ROBERT 6160 SW 58TH COURT DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHNURMACHER, JEFFREY 17 GARDEN PATH FARMINGTON, CT 06032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHNURMACHER, JEANNETTE 12280 NW 4TH ST PLANTATION, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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04/25/08-80070-005 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Leonard M. Schnurmacher 4/10/08 954-472-7200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #