

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 8:00 am
Secretary of State

01-10-2006 90028 007 ****61.25

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1. Entity Name
THE SALIZZONI FAMILY FOUNDATION, INC.



Principal Place of Business
**288 LOCHA DRIVE
JUPITER, FL 33458**

Mailing Address
**288 LOCHA DRIVE
JUPITER, FL 33458**

60000694



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0710648

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SALIZZONI, SARAH
288 LOCHA DRIVE
JUPITER, FL 33458**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPST ☐ Delete
NAME SALIZZONI, SARAH
STREET ADDRESS 288 LOCHA DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME SALIZZONI, JOHN
STREET ADDRESS 38 ROSEWELL RD
CITY-ST-ZIP BEDFORD, NH 03110

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **13 HIGH MEADOW LANE**
CITY-ST-ZIP **AMHERST, NH, 03031**

TITLE D ☐ Delete
NAME DEAN, LAURA
STREET ADDRESS 215 PINE VALLEY RD
CITY-ST-ZIP WINSTON SALEM, NC 27104

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME REVERDY, SUSAN
STREET ADDRESS 190 MAPLE STREET
CITY-ST-ZIP FRAMINGHAM, MA 01701

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **STOW, MA 01775**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **L. CHAIRMAN**
STREET ADDRESS **FRANK SALIZZONI**
CITY-ST-ZIP **288 LOCHA DRIVE**
JUPITER, FL 33458

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Sarah Salizoni - SARAH SALIZZONI

1/5/06 561-747-7119

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #