

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000006336

FILED
Oct 13, 2005
Secretary of State

Entity Name: RABISON FAMILY FOUNDATION, INC.

Current Principal Place of Business:

460 EAST OCEAN
APT 625
LAKE WORTH, FL 33462

New Principal Place of Business:

2792 DONNELLY DRIVE
LAKESIDE VILLAGE, APT 125
LANTANA, FL 33462

Current Mailing Address:

589567460 EAST OCEAN
APT 625
LAKE WORTH, FL 33462

New Mailing Address:

2792 DONNELLY DRIVE
LAKESIDE VILLAGE, APT 125
LANTANA, FL 33462

FEI Number: 65-6225556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RABISON, EVELYN
460 EAST OCEAN AVE
LAKE WORTH, FL 33462 US

Name and Address of New Registered Agent:

RABISON, EVELYN
2792 DONNELLY DRIVE
LAKESIDE VILLAGE, APT 125
LANTANA, FL 33462 US

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: EVELYN RABISON

10/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RBISON, EVELYN
Address: 1006 E. CYPRESS DRIVE
City-St-Zip: POMPANO BEACH, FL

Title: VPD () Delete
Name: RABISON, SAMUEL D
Address: 112 KENDALL RD
City-St-Zip: LEXINGTON, MA

Title: SD () Delete
Name: KUTZ-JACOBSON, SUE
Address: 56 USISHKIN ST
City-St-Zip: TEL AVIV, IS

Title: T () Delete
Name: RABISON, EVELYN
Address: 1006 E. CYPRESS DRIVE
City-St-Zip: POMPANO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RABISON, EVELYN
Address: 2792 DONNELLY DRIVE, APT 125
City-St-Zip: LANTANA, FL 33462

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: RABISON, BRUCE
Address: 2792 DONNELLY DRIVE, APT 125
City-St-Zip: LANTANA, FL 33462

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EVELYN RABISON

PD

10/13/2005

Electronic Signature of Signing Officer or Director

Date