FILED
May 14, 2003 8:00 am
Secretary of State
04-07-2003 90746 028 ****61.25

55040887

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000000892

1. Entity Name

THE OKUN FAMILY FOUNDATION, INC.

Principal Place of Business	Mailing Address
28 HARRISON AVE STE 201 ENGLISHTOWN NJ 07726	28 HARRISON AVE STE 201 ENGLISHTOWN NJ 07726

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0749122 ☐ Applied For ☐ Not Applicable

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
DONOFF, CRAIG 6100 GLADES ROAD, SUITE 204 BOCA RATON FL 33434	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 date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P OKUN, HYMAN W 5500 N.W. 2ND AVE., #425 BOCA RATON FL 33487	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE T / NAME / STREET ADDRESS / CITY-ST-ZIP	ST OKUN, FLORENCE P 5500 N.W. 2ND AVE., #425 BOCA RATON FL 33487	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE HARBOREDGE 401 EASTLINTON BLVD APT 367 DELRAY BEACH FL 33483 ☒ Change ☐ Addition
TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD OKUN, JAY P 5500 N.W. 2ND AVE., #425 BOCA RATON FL 33487	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT 28 Harrison Ave Ste 201 ENGLISHTOWN NJ 07726 ☒ Change ☐ Addition
TITLE T / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ROWAT, RITA WINONA 5500 N.W. 2ND AVE., #425 BOCA RATON FL 33487	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: SIGNATURE REQUIRED _____ 4/3/03 732-446-8753
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

55040887

#N97000000892

THE OKUN FAMILY FOUNDATION
28 HARRISON AVENUE SUITE 201
ENGLISHTOWN NJ 07726
732-446-8750 (FAX) 732-446-8921

JAY P, OKUN, DIRECTOR
28 HARRISON AVE SUITE 201
ENGLISHTOWN. NJ 07726

RITA WINONA ROWAT, TRUSTEE
2605 ELLENTOWN RD
LA JOLLA CA 92037

FLORENC P. OKUN, TRUSTEE
HARBOR EDGE
401 EAST LINTON BLVD APT 357
DEL RAY BEACH FL 33483