


2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N97000001411</b>	
1. Entity Name BJ'S FOUNDATION, INC.	

Principal Place of Business 521 EAST LAS OLAS BLVD. FORT LAUDERDALE, FL 33301	Mailing Address 521 EAST LAS OLAS BLVD. FORT LAUDERDALE, FL 33301
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**DO NOT WRITE IN THIS SPACE**



04252006 No Chg-NP CR2E037 (11/05)

4. FEI Number 65-0745280	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	
BUNTROCK, ELIZABETH 521 E. LAS PLAS BL FORT LAUDERDALE, FL 33301	

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUNTROCK, ELIZABETH H 521 EAST LAS OLAS BLVD. FORT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUNTROCK, CECILY 521 EAST LAS OLAS BLVD. FORT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUNTROCK, DANA 1242 NO LAKESHORE DRIVE APT 17N CHICAGO, IL 60610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000550350  
05/13/06-80058-002 61.25

**DO NOT WRITE IN THIS SPACE**

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: <u>Elizabeth Buntrock</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4/26/06 954) 764-5156 <small>Date Daytime Phone #</small>
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