

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001530

FILED
Jan 05, 2006
Secretary of State

Entity Name: THE KORTH FAMILY FOUNDATION, INC.

Current Principal Place of Business:

8881 NW 13TH TERRACE
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

8881 NW 13TH TERRACE
MIAMI, FL 33172

New Mailing Address:

FEI Number: 65-0737345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KORTH, JAMES E
Address: 8881 NW 13TH TERRACE
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: KORTH, VALERIE W
Address: 8881 NW 13TH TERRACE
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: KORTH, WILLIAM F
Address: 8320 HARDEE DRIVE
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: KORTH, THOMAS A
Address: P.O. BOX 0468
City-St-Zip: ADA, MI 49301

Title: D () Delete
Name: KORTH, JAMES W
Address: 3575 STEWART AVENUE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: KORTH, WILLIAM F
Address: 8320 SW 64 ST
City-St-Zip: MIAMI, FL 33143

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

Title: D (X) Change () Addition
Name: KORTH, JAMES W
Address: 4022 S DOUGLAS RD
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: THOMAS KORTH

D

01/05/2006

Electronic Signature of Signing Officer or Director

Date