FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

N97000002086 (3)

FILED May 20 1998 8:00am Secretary of State

THE BERTRAM AND SUZANNE SCHILD CHARITABLE FOUNDA TION, INCORPORATED						
Principal Place of Business		Mailing Address				I JOOSHO AND INTIN NOOM CONT. CONT. CONT. CONT. SELON
19500 TURNBERRY WAY Apartment 22a North Miami Beach Fl 33180		19500 TURNBERRY WAY APARTMENT 22A NORTH MIAMI BEACH FL 33180			3. Date Incorporated or Qualified 04/14/1997 4. FEI Number 3. Date Incorporated or Qualified Applied For Not Applicable	
2. Principal Place of Business		2a. Mailing Address 28			5. Certificate of Status Desired \$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State		City & State			7. Is this nonprofit corporation a homeowners association?	
Zip 24	Country 25	Z ip 29	30 Co	untry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
9. Name and Address of Current Registered Agent				1		10. Name and Address of New Registered Agent
traum, sydney s semet lickstein morgenstern et al				81 Name 82 Street Address (P.O. Box Number is Not Acceptable)		
201 ALHAMBRA CIRCLE, STE 1200 Coral gables fl 33134				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE						
7	Signature, typed or printed name of registered agent				signature r	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTO	-		TITLE	i	LI Change LI Addition
NAME	\$CHILD, BERTRAM		1.21	1.2 NAME		
STREET ADDRESS CITY-ST-ZIP				1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE			2.11	TITLE		Change Addition
NAME	SCHILD, SUZANNE LEE		2.21	NAME		
STREET ADDRESS	RESS 19500 TURNBERRY WAY		2.3 8	2.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33180		2.4	2. 4 CITY-ST-ZIP		
TITLE	D DELETE		3.11	3.1 TITLE		Change Addition
NAME	\$CHILD, KENNETH		3.21	3.2 NAME		
STREET ADDRESS 19500 TURNBERRY WAY		3.3 9	3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4.	3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.11	TITLE		Change Addition
NAME	SCHILD, MARK DAVID		4. 2	NAME		
STREET ADDRESS	19500 TURNBERRY WAY		4.3 \$	street a	DDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 3318	30	4,4 (CITY - ST-	- ZIP	

14. 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 annual report or supplemental annual 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 receivor or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

DELETE

DELETE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Seller 4/30/98 Change

Change

Addition

Addition