

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002449

FILED
Feb 27, 2006
Secretary of State

Entity Name: THE SCANLAN-SHUFF FAMILY FOUNDATION, INC.

Current Principal Place of Business:

#1 - SOUTH
750 S. OCEAN
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1201 GEORGE BUSH BLVD
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 65-0750854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPIN, ROBERT D
1201 GEORGE BUSH BLVD
DELRAY BEACH, FL 33483 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: SHUFF, MARGARET MARY
Address: 750 S. OCEAN #1-SOUTH
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: SHUFF, JOHN E
Address: 750 S. OCEAN #1-SOUTH
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: SHUFF, MARY L
Address: 750 S. OCEAN #1-SOUTH
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: SHUFF, DAVID R
Address: 750 S. OCEAN #1-SOUTH
City-St-Zip: BOCA RATON, FL 33432 OC

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ROBERT D. CHAPIN

RA

02/27/2006

Electronic Signature of Signing Officer or Director

Date