## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700003507 (7)

Michi Floridz 33193

44647 S.W 18th Court

Michael Greenberg

Davie Florida

Directos

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

ALBERT E. AND ESTHER G. KAUFMAN FOUNDATION, INC.

Principal Place of Business Mailing Address 2861 NE 23RD STREET 2861 NE 23RD STREET 3. Date Incorporated or Qualified FORT LAUDERDALE FL 33305 FORT LAUDERDALE FL 33305 06/17/1997 4. FEI Number Applied For 65-0763952 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? ☐ Yes 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes X No 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KAUFMAN, ESTHER G 82 Street Address (P.O. Box Number is Not Acceptable) 2861 NE 23RD STREET 83 FORT LAUDERDALE FL 33305 City 85 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Director DELETE 1.1 TITLE Change TITLE Philip Shenkmen 12515 N. Ken 2211 Or # 314 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS Mieni Florida 1.4 CITY-ST-ZIP CITY-ST-7IP Change Addition Dircezes DELETE 2.1 TITLE TITLE Esther KENFMEN NAME 2.2 NAME 2861 N.E. 23-1 Street STREET ADDRESS 2.3 STREET ADDRESS Ft Lerderlale FL 33301 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE Director" 3.1 TITLE TITLE AUTTEN Zoha 6901 S.W. 147th Avenue Bidg 6 Aprzc 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS

64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 receiver 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.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

DELETE

DELETE

DELETE

SIGNATURE: 6 - SIGNATURE REPORTEDANCE G. ENEMAN 1/8/98 954-566-0521

CR2E037 (10/97)

Change

Change

Change

Addition

Addition

Addition

**FILED** 

Feb 03 1998 8:00am

Secretary of State