

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004046

FILED
Apr 18, 2008
Secretary of State

Entity Name: THE EVELYN AND BERNARD WOOLMAN FAMILY FOUNDATION, INC.

Current Principal Place of Business:

4601 COMMUNITY DR.
W. PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

4601 COMMUNITY DR.
W. PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 65-0779801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASCH, MICHELLE
JEWISH FEDERATION OF P. B. COUNTY
4601 COMMUNITY DR
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

BREITSTEIN, JOEL
JEWISH FEDERATION OF P. B. COUNTY
4601 COMMUNITY DR
WEST PALM BEACH, FL 33417 US

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: JOEL BREITSTEIN

04/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WOOLMAN, BERNARD
Address: 13860 DEGAS E
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VD () Delete
Name: WOOLMAN, EVELYN
Address: 13860 DEGAS E
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: T () Delete
Name: WASCH, MICHELLE
Address: 4601 COMMUNITY DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: HOFFMAN, HELEN
Address: 150 BRADLEY PLACE, #616-A
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: KRELENSTEIN, SHIRLEY
Address: 13179 CAMERO WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: KLEIN, JEFFREY L
Address: 4601 COMMUNITY DR.
City-St-Zip: W. PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: BREITSTEIN, JOEL
Address: 4601 COMMUNITY DRIVE
City-St-Zip: WEST PALM BEACH, FL 33417

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 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: JOEL BREITSTEIN

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04/18/2008

Electronic Signature of Signing Officer or Director

Date