

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004046

FILED  
Apr 05, 2012  
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:**

BREITSTEIN, JOEL  
JEWISH FEDERATION OF P. B. COUNTY  
4601 COMMUNITY DR  
WEST PALM BEACH, FL 33417 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:** PD  
**Name:** WOOLMAN, BERNARD  
**Address:** 13860 DEGAS E  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410

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

**Title:** T  
**Name:** BREITSTEIN, JOEL  
**Address:** 4601 COMMUNITY DRIVE  
**City-St-Zip:** WEST PALM BEACH, FL 33417

**Title:** S  
**Name:** LINDSEY, SHARON  
**Address:** 4601 COMMUNITY DRIVE  
**City-St-Zip:** WEST PALM BEACH, FL 33417

**Title:** D  
**Name:** LEVINE, CAROLE-ANN  
**Address:** 4601 COMMUNITY DRIVE  
**City-St-Zip:** WEST PALM BEACH, FL 33417

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

I hereby 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 all other like empowered.

**SIGNATURE:** JOEL BREITSTEIN

T

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date