

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006313

FILED
Jan 15, 2009
Secretary of State

Entity Name: THE SANKIN FAMILY FOUNDATION, INC.

Current Principal Place of Business:

727 PINE LAKE DRIVE
DELRAY, FL 33445

New Principal Place of Business:

Current Mailing Address:

727 PINE LAKE DRIVE
DELRAY, FL 33445

New Mailing Address:

FEI Number: 65-0794721

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIMON, LINDA K
648 MANATEE BAY DRIVE
BOYNTON BEACH, FL 33435 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 () Delete
Name: SANKIN, JEANNE
Address: 727 PINE LAKE DRIVE
City-St-Zip: DELRAY, FL 33445

Title: DVP () Delete
Name: SANKIN, JEANNE
Address: 727 PINE LAKE DRIVE
City-St-Zip: DELRAY, FL 33445

Title: DT () Delete
Name: SANKIN, ANDREW
Address: 727 PINE LAKE DR
City-St-Zip: DELRAY BEACH, FL 33445

Title: SD () Delete
Name: SANKIN, MARILYN
Address: 1111 BEACON STREET APT 18
City-St-Zip: BROOKLINE, MA 02446

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 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: JEANNE SANKIN

PD

01/15/2009

Electronic Signature of Signing Officer or Director

Date