

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000006313

**FILED**  
**Mar 23, 2012**  
**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  
2737 IRMA LAKE DRIVE  
WEST PALM BEACH, FL 33411 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: SANKIN, JEANNE  
Address: 727 PINE LAKE DRIVE  
City-St-Zip: DELRAY, FL 33445

Title: DVP  
Name: SANKIN, ANDREW C  
Address: 727 PINE LAKE DRIVE  
City-St-Zip: DELRAY, FL 33445

Title: DT  
Name: SIMON, LINDA  
Address: 2737 IRMA LAKE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33411

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

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:** LINDA K SIMON

DT

03/23/2012

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

\_\_\_\_\_  
Date