

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001266

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** BELA B. NEVAI AND CLARA NEVAI CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

C/O FINE  
16657 SWEET BAY DR  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

C/O FINE  
16657 SWEET BAY DR  
DELRAY BEACH, FL 33445

**New Mailing Address:**

**FEI Number:** 65-0835059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FINE, ELI B  
16657 SWEET BAY DR  
DELRAY BEACH, FL 33445 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: D  
Name: NEVAI, ANDRAS  
Address: P.O. BOX 10861  
City-St-Zip: SEDONA, AZ 86339

Title: D  
Name: FINE, ELI B  
Address: 16657 SWEETBAY DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

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: ELI B FINE

MR

03/15/2011

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

\_\_\_\_\_  
Date