

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004394

1. Entity Name

THE JOAN F. & SIDNEY S. FABER FOUNDATION, INC.

Principal Place of Business

4601 COMMUNITY DRIVE
WEST PALM BEACH FL 33417

Mailing Address

4601 COMMUNITY DRIVE
WEST PALM BEACH FL 33417

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

~~PHILIPS, EUGENE~~ HOWARD A. FELDMAN
4601 COMMUNITY DRIVE
WEST PALM BEACH FL 33417

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Howard A. Feldman

HOWARD A. FELDMAN

4/16/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME FABER, SIDNEY
STREET ADDRESS 131 PAR DRIVE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE STD ☒ Delete
NAME MARLIN, PENNY
STREET ADDRESS 4601 COMMUNITY DRIVE
CITY-ST-ZIP WEST PALM BEACH FL 33417

TITLE VD ☐ Delete
NAME SIMON, ADELE
STREET ADDRESS 1883 INDIAN ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Change ☒ Addition
NAME MICHELLE WAGCH SCHWARTZ
STREET ADDRESS 4601 COMMUNITY DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TT ☐ Change ☒ Addition
NAME HOWARD A FELDMAN
STREET ADDRESS 4601 COMMUNITY DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33417

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Howard A. Feldman

HOWARD A. FELDMAN

4/16/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90176 019 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)