

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90036 006 ****61.25

DOCUMENT # N98000006249

1. Corporation Name

THE SPARROW'S SONG FOUNDATION, INC.

Principal Place of Business

1010 SHADY LAKES CIRCLE
PALM BEACH GARDENS FL 33418

Mailing Address

1010 SHADY LAKES CIRCLE
PALM BEACH GARDENS FL 33418



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

11/02/1998

4. FEI Number

65-0872994

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

WOLMER, BRENT
1010 SHADY LAKES CIRCLE
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME GINBURG, DAN
STREET ADDRESS 1010 SHADY LAKES CIRCLE
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE D ☐ DELETE
NAME OHMIT, TERESA
STREET ADDRESS 1010 SHADY LAKES CIRCLE
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE D ☐ DELETE
NAME WOLMER, BRENT
STREET ADDRESS 1010 SHADY LAKES CIRCLE
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS Le Chalet
1.4 CITY-ST-ZIP 51500 Chigny-Les-Roses France

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS Le Chalet
2.4 CITY-ST-ZIP 51500 Chigny-Les-Roses France

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brent G. Wolmer 3-15-99 561/844-3600

Date

Daytime Phone #

CR2E037 (1/98)