ANNUAL REPORT

1999

NONPROFIT CORPORATION

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000006865

Country

9. Name and Address of Current Registered Agent

25

Corporation Name

SY AND GLADYS ZIV FOUNDATION, INC.

Principal Place of Business
C/O SEYMORE ZIV 150 BRADLEY PL. ALBA STE.
DALU BEACH EL 20480

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

ZIV. SEYMORE

SIGNATURE:

23

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Zip

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

City & State

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C/O SEYMORE ZIV 150 BRAQLEY PL. ALBA STE. PALM BEACH FL 33480

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90132 017 ****61.25

Applied For

\$8.75. Additional_

Fee Required -

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualifed

191 160100

5. Certificate of Status Desired

10. Name and Address of New Registered Agent

6. Election Campaign Financing

Trust Fund Contribution

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

12/07/1998

150 BRAD	LEY PL., ALBA STE.	83	├					
PALM BEA	CH FL 33480	"	1		_			
		84	City	FL	85	Zip Co	xde	
			L		chang	nn ite n	rejetorod	
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: Reg		nt signature r	equired when reinstating) DATE				
12. OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS AN				
TILE	₹ 100000	Limbs		PRESIDENT 4		ange	Addition	
NAME	SEYMORE L. ZIV	12 NAME		DIRECTOR				
STREET ADDRESS	150 BRADLEY PLACE TO SE	1.3 STREE	TADORESS				ĺ.	
CITY-ST-ZIP	PALM BEACH FL 33480	1.4 CTY-5	π-ZP				—	
TITLE	Cal DELETE	211112		TREASURER & SECRETARY	□ CI	ange	Addition	
NAME	GLADYS L. ZIV ALBA STE	2.2 NAME	l	SECRETARY			ì	
STREET ADDRESS	150 BRADLEY PLACE ALL	2.3 STREE	TADDRESS	32				
CITY-ST-ZIP	PALM BEACH PL 33480	2.4CTY-	ST-ZIP					
_TITLE	DELETE	3,1,TITLE:			≠E]C	lange	= ☐ Addition:	
NAME	SCOTT SEGEN	3.2 NAME		DIRECTOR				
_STREET ADDRESS	BHIT GUIAL MEADOW WAY	3.3 STREE	TADDRESS					
CITY-ST-ZIP	W. PALM BEALH FL 33412	3.4. CITY-	ST-ZIP					
TITLE	☐ DELETE	4.1 TITLE				suge	☐ Addition (
NAME		4. 2 NAME					1	
STREET ADDRESS		4.3 STREE	TADORESS				. 1	
CITY-ST-ZIP		4.4 CITY-5	T-ZIP					
TITLE	☐ DELETE	5.1 TITLE				ange	Addition	
NAME		5.2 NAME					1	
STREET ADDRESS		5.3 STREE	T ADDRESS				1	
CITY-ST-ZIP		5.4 CITY-5	T-2IP					
TITLE	☐ DELETE	6.1 TITLE				ange	☐ Addition	
NAME		8.2 NAME						
STREET ADDRESS		6.3 STREE	T ADDRESS					
CITY, ST-78P		8.4 CITY-5						
14. I hereby certify that the Information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(!). 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, of on an attachment with an address, with all other like empowered.								

Country

81 Name

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