## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000002331

Entity Name: CONQUER FRAGILE X FOUNDATION, INC.

FILED Jan 11, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

189 BRADLEY PLACE 2500 SOUTH OCEAN BLVD.

#ONE #1-B-1

PALM BEACH, FL 33480 PALM BEACH, FL 33480

**Current Mailing Address: New Mailing Address:** 

PO BOX 128

PALM BEACH, FL 33480

FEI Number: 65-0910605 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FAY, KAREN M FAY, KAREN M

189 BRADLEY PLACE 2500 SOUTH OCEAN BLVD. #ONE # 1-B-1

PALM BEACH, FL 33480 US PALM BEACH, FL 33480 US

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: KAREN M. FAY 01/11/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

HARRIS, HOLLIN HARRIS, HOLLIN HON. Name: Name: 2500 SOUTH OCEAN BLVD, STE. 1-B-1 Address: 2500 SOUTH OCEAN BLVD, STE. 1-B-1 Address:

PALM BEACH, FL 33480 PALM BEACH, FL 33480

City-St-Zip: City-St-Zip:

Title: SD Title: PD (X) Change ( ) Addition ( ) Delete Name: FAY, KAREN Name: FAY, KAREN

Address: 189 BRADLEY PLACE Address: 712 FLAMINGO DR.

City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Delete Title: () Change () Addition

HOLLIN, LARRY Name: Name: 1211 GAINSBORO RD. Address: Address: City-St-Zip: BALA CYNWYD, PA 19004 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HARRIS N. HOLLIN CHM 01/11/2007