2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2009
Secretary of State

DOCUMENT# N99000003698

Entity Name: THE ARTHUR AND SUSAN KARP FAMILY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

580 SOUTH MCINTOSH ROAD
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

580 SOUTH MCINTOSH ROAD
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-1222747 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TEVLOWITZ, HOWARD
580 SOUTH MCINTOSH RD
SARASOTA, FL 34232 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	( ) Delete
Name:	KNOWLES, CHARLES	
Address:	4034 ROBERTS POINT	
City-St-Zip:	SARASOTA, FL 34242	
Title:	D	( ) Delete
Name:	KARP, MARY SUE	
Address:	7902 SANDERLING ROAD	
City-St-Zip:	SARASOTA, FL 34242	
Title:	PD	( ) Delete
Name:	KARP, SAMANTHA A	
Address:	7902 SANDERLING ROAD	
City-St-Zip:	SARASOTA, FL 34242	
Title:	SD	( ) Delete
Name:	KARP, TAMMY S	
Address:	8855 MIDNIGHT PASS ROAD	
City-St-Zip:	SARASOTA, FL 34242	
Title:	D	( ) Delete
Name:	KARP, RICHARD J	
Address:	8855 MIDNIGHT PASS ROAD	
City-St-Zip:	SARASOTA, FL 34242	
Title:	TD	( ) Delete
Name:	KARP, HAUSER J	
Address:	7902 SANDERLING RD.	
City-St-Zip:	SARASOTA, FL 34232	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD KARP D 02/03/2009

Electronic Signature of Signing Officer or Director — Date