2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3. Mailing Address

City & State

Suite, Apt. #, etc.

6088 ROYAL BIRKDALE DR LAKE WORTH FL 33463

DOCUMENT # N9900004873

1. Entity Name

Principal Place of Business

2. Principal Place of Business

6088 ROYAL BIRKDALE DR

LAKE WORTH FL 33463

Suite, Apt. #, etc.

City & State

Zip

SIGNÁTURE

EMILY DORFMAN CHARITABLE FOUNDATION, INC.



FILED Mar 12, 2003 8:00 am Secretary of State

03-12-2003 90124 011 ****61.25

40048.140



DORFMAN, ANDREA 6088 ROYAL BIRKDALE OR LAKE WORTH FL 33463

Country

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent						
Name-	·-#	ير شميني د				
Street Address (P.O. Box I	Number is Not Ac	ceptable)				
City			- 1	Zip Code		
 ed office or registered agent.	or both, in the SI		FL I			

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. I am familiar with, and accept the obligations of registered agent.

Country

FILE NOW: FEE 4S \$61.25

9. Election Campaign Financing

Trust Fund Contribution.

(NOTE: Registered Agent signature required when reinstating)

\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State

	· '							
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OF		S TO OFFICERS AND DIRECTO	FICERS AND DIRECTORS IN 10		
TITLE	D tan 1	☐ Delete	TITLE		☐ Ch	ange	☐ Addition	
NAME	Dorfman, andrea		NAME					
STREET ADDRESS	6088 ROYAL BIRKDALE DR		STREET ADDRESS					
CITY-ST-ZIP	LAKE WORTH FL 33463		CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE		□ Ch	ange	Addition	
NAME	DORFMAN, PHILIP		NAME					
STREET ADDRESS	6088 ROYAL BIRKDALE DR		STREET ADDRESS		i			
CITY-ST-ZIP	LAKE WORTH FL 33463		CITY-ST-ZIP					
-TITLE '	D voes-conserved	Delete -	TITLE	نسف ۾ تقرو ڪينجي جندن	Ch		Addition	
NAME	MONASTRA, JOSEPH		NAME	min Andros Ca	ire havie at a	2 1		
STREET ADDRESS	6395 COUNTRY FAIR CIRCLE		STREET ADDRESS	2115 Hater C	we drive to	-		
CITY-ST-ZIP	BOYNTON BEACH FL-99437		CITY-ST-ZIP	BOYNTON BEAC	Ke Drve, #6 H, FL 33487 Ora			
TITLE	D	☐ Delete	TITLE		∑ Ch	ange	☐ Addition	
NAME	MONACTRA, CORA		NAME	BRESCIANO, C	ora '		1	
STREET ADDRESS	6305 COUNTRY FAIR CIRCLE		STREET ADDRESS					
CITY-ST-ZIP	BOYNTON BEACH FL 33437		CITY-ST-ZIP				<u></u>	
TITLE		Delete	TITLE	D	☐ Ch	ange	Addition	
NAME			NAME	SORKIN, ALAIN 5301 CANOE BI	3 <u>6.</u> 			
STREET ADDRESS			STREET ADDRESS	2301 CYNOR AL	NO PETOE			
CITY-ST-ZIP			CITY-ST-ZIP	LAKE WORTH, P	L 33463			
TITLE		☐ Delete	TITLE		☐ Ch	ange	Addition	
NAME			NAME				j	
STREET ADDRESS			STREET ADDRESS					
CITY ST 7ID			CITY-ST-7IP					

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 SAIDLE OF STEPHEN 1/24/03 329-783

CR2E037 (10/0)