

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005175

FILED
Jan 08, 2008
Secretary of State

Entity Name: MESTAL FOUNDATION, INC.

Current Principal Place of Business:

340 ROYAL POINCIANA WAY
SUITE 321
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

C/O STUART J. HAFT ESQ
P.O. BOX 431
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-1143759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAFT, STUART J ESQ
340 ROYAL POINCIANA WAY
SUITE 321
PALM BEACH, FL 33480 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: DP () Delete
Name: HAFT, ALLISON R
Address: 340 ROYAL POINCIANA WAY, #321
City-St-Zip: PALM BEACH, FL 33480

Title: DT () Delete
Name: HAFT, STUART J
Address: 340 ROYAL POINCIANA WAY, #321
City-St-Zip: PALM BEACH, FL 33480

Title: DS () Delete
Name: MEYER, ROBERT C
Address: 405 DUNROBIN LANE
City-St-Zip: SIMPSONVILLE, SC 29681

Title: DVP () Delete
Name: MEYER, STEPHANIE L
Address: 405 DUNROBIN LANE
City-St-Zip: SIMPSONVILLE, SC 29681

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: MEYER, ROBERT C
Address: 340 ROYAL POINCIANA WAY #321
City-St-Zip: PALM BEACH, FL 33480

Title: DVP (X) Change () Addition
Name: MEYER, STEPHANIE L
Address: 340 ROYAL POINCIANA WAY #321
City-St-Zip: PALM BEACH, FL 33480

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: ALLISON R HAFT

P

01/08/2008

Electronic Signature of Signing Officer or Director

Date