


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2008 08:00 A
Secretary of State

DOCUMENT # N99000006066 1. Entity Name SALENGER FAMILY CHARITABLE FOUNDATION, INC.	
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Principal Place of Business 1955 GULF OF MEXICO DR LONGBOAT KEY, FL 34228	Mailing Address PO BOX 8905 LONGBOAT KEY, FL 34228
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02032008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0966360	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**BROWNING, GEORGE III
46 N. WASHINGTON BOULEVARD #27
SARASOTA, FL 34237**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KASS, NICHOLAS L 125-10 QUEEN BLVD STE 7 KEW GARDENS, NY 11415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SALENGER, STUART 194 FREEMAN STREET BROOKLYN, NY 11222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWNING, GEORGE III 46 N. WASHINGTON BOULEVARD #27 SARASOTA, FL 34237
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U00000849820
03/21/08-80036-006 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **3/3/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #