


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90044 026 ****61.25

DOCUMENT # P30891

1. Entity Name
PHILIP ZINMAN FOUNDATION, INCORPORATED



40002175



01052005 - Chg-NP - CR2E037 (10/03)

Principal Place of Business
21474 LINWOOD CT
BOCA RATON, FL 33433 US

Mailing Address
21474 LINWOOD CT
BOCA RATON, FL 33433 US

2. Principal Place of Business
21298 HARROW CT.
 Suite, Apt. #, etc.

3. Mailing Address
21298 HARROW CT.
 Suite, Apt. #, etc.

City & State
BOCA RATON, FL

City & State
BOCA RATON, FL

Zip
33433

Country
USA

Zip
33433

Country
USA

4. FEI Number
21-6015665

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ZINMAN ELIZABETH S
21474 LINWOOD CT
BOCA RATON, FL 33433

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
21298 HARROW CT.

City
BOCA RATON

State
FL

Zip Code
33433

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 *Elizabeth S. Zinman Pres* DATE 1/13/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
PTD Delete

NAME
ZINMAN, ELIZABETH S

STREET ADDRESS
21474 LINWOOD CT

CITY-ST-ZIP
BOCA RATON, FL

TITLE Change Addition

NAME

STREET ADDRESS
21298 HARROW CT.

CITY-ST-ZIP
BOCA RATON, FL 33433

TITLE
SD Delete

NAME
FREEMAN, YALE T

STREET ADDRESS
153 WEST AVENUE

CITY-ST-ZIP
NAPLES, FL 34108

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
D Delete

NAME
ZINMAN, BRIAN

STREET ADDRESS
314 EARLES LANE

CITY-ST-ZIP
NEWTOWN SQUARE, PA 19073

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
D Delete

NAME
NALENCZ, LEONARD P.

STREET ADDRESS
ONE LOGAN SQUARE

CITY-ST-ZIP
PHILADELPHIA, PA 19103

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
D Delete

NAME
ALLOY, MARVIN D.

STREET ADDRESS
900 KINGS HIGHWAY NORTH

CITY-ST-ZIP
CHERRY HILL, NJ

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
D Delete

NAME
SCHWEIGER, ANTHONY

STREET ADDRESS
240 TRIANON LANE

CITY-ST-ZIP
VILLANOVA, PA 19085

TITLE Change Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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: *Elizabeth S. Zinman Pres* Date 1/13/05 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR