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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P34477 (0)

1. Corporation Name

SHIRLEY WALDBAUM WITKIN FOUNDATION, INC.



Principal Place of Business

Mailing Address

% JOAN SIERCHIO  
16 GLENOLA AVENUE  
SEA CLIFF NY 11579

% JOAN SIERCHIO  
16 GLENOLA AVENUE  
SEA CLIFF NY 11579

3. Date Incorporated or Qualified  
06/21/1991

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number  
22-3082447

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WITKIN, SHIRLEY  
3062 EASTLAND BLVD., APT. 304D  
CLEARWATER FL 34621

81 Name

82 (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE  
NAME WITKIN, SHIRLEY  
STREET ADDRESS 3062 EASTLAND BLVD.  
CITY-ST-ZIP CLEARWATER FL

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE VSD ☐ DELETE  
NAME SIERCHIO, JOAN  
STREET ADDRESS 16 GLENOLA AVENUE  
CITY-ST-ZIP SEA CLIFF NY

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

TITLE VAS ☐ DELETE  
NAME LOEB, SUSAN  
STREET ADDRESS 7 GLENOLA AVENUE  
CITY-ST-ZIP SEA CLIFF NY

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME LOEB, SUSAN  
STREET ADDRESS 7 GLENOLA AVENUE  
CITY-ST-ZIP SEA CLIFF NY

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE VAT ☐ DELETE  
NAME WOOD, BARBARA  
STREET ADDRESS 1722 N. ROXBORO RD.  
CITY-ST-ZIP DURHAM NC

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME WOOD, BARBARA  
STREET ADDRESS 1722 N. ROXBORO RD.  
CITY-ST-ZIP DURHAM NC

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Shirley Waldbaum Witkin

SG 4-18-96