I hereby 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 all other like empowered.

SIGNATURE: JOSEPH GOLDEN

City-State-Zip: PLAINFIELD MA 01070

Electronic Signature of Signing Officer/Director Detail

TREASURER

03/30/2020

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000000771

Entity Name: LENORE R. BLAND AND SYDNEY F. BLAND CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

C/O CRAIG DEARR, SUITE 1701 9100 SOUTH DADELAND BLVD.PH-1 MIAMI, FL 33156

Current Mailing Address:

C/O CRAIG DEARR, SUITE 1701 9100 SOUTH DADELAND BLVD.PH-1 MIAMI, FL 33156 US

FEI Number: 65-0980024

Name and Address of Current Registered Agent:

DEARR, CRAIG ESQ 9100 SOUTH DADELAND BLVD., PH-1 SUITE 1701 MIAMI, FL 33156 US Certificate of Status Desired: No

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

Officer/Director Detail :

| Unicer/Director Detail. | | | |
|-------------------------|-------------------|-----------------|-------------------|
| Title | VSD | Title | TD |
| Name | GOLDEN, CARYN | Name | GOLDEN, JOSEPH |
| Address | 13 PALESTINE ROAD | Address | 13 PALESTINE ROAD |
| City-State-Zip: | NEWTOWN CT 06470 | City-State-Zip: | NEWTOWN CT 06470 |
| Title | D | | |
| Name | BLAND, NORMAN D | | |
| Address | P.O. BOX 21 | | |

FILED Mar 30, 2020 Secretary of State 2905709879CC

Date

Date