2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00657

Entity Name: THE ISIDORE AND PATRICIA WOLLOWICK FAMILY

FOUNDATION, INC.

Current Principal Place of Business:

C/O LAWRENCE S. KLITZMAN, ESQ. 1391 SAWGRASS CORPROATE PKWY SUNRISE, FL 33323

Current Mailing Address:

C/O LAWRENCE S. KLITZMAN, ESQ. 1391 SAWGRASS CORPROATE PKWY SUNRISE, FL 33323 US

FEI Number: 59-2371537 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLITZMAN LAW GROUP, PLLC C/O LAWRENCE S. KLITZMAN, ESQ. 1391 SAWGRASS CORPROATE PKWY SUNRISE, FL 33323 US

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: LAWRENCE KLITZMAN 05/01/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR, VP, TREASURER Title DIRECTOR, VP, SECRETARY

WOLLOWICK, JANET A. Name Name LOWE, SANDRA L. Address 1729 NW 126TH DRIVE Address 3500 N. 34TH AVENUE City-State-Zip: CORAL SPRINGS FL 33071 City-State-Zip: HOLLYWOOD FL 33021

Title **DIRECTOR** Title DIRECTOR

Name **DUNN, BERNADETTE** Name STEIN, RHODA W.

800 PARKVIEW DRIVE Address Address 1351 S.W. 141ST AVENUE

APT. 522 SUFFOLK G-110

City-State-Zip: HALLANDALE BEACH FL 33009 PEMBROKE PINES FL 33027 City-State-Zip:

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.

Electronic Signature of Signing Officer/Director Detail

FILED May 01, 2015

Secretary of State

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