

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012078

Entity Name: ELLEN & RONALD BLOCK FAMILY FOUNDATION, INC.**Current Principal Place of Business:**2 NORTH BREAKERS ROW, PHN2
PALM BEACH, FL 33480**Current Mailing Address:**2 NORTH BREAKERS ROW, PHN2
PALM BEACH, FL 33480 US**FEI Number:** 20-2067790**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLOCK, ELLEN H
2 NORTH BREAKERS ROW, PHN2
PALM BEACH, FL 33480 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	BLOCK, ELLEN H
Address	2 NORTH BREAKERS ROW, PHN2
City-State-Zip:	PALM BEACH FL 33480

Title	D
Name	BLOCK, LAURIE A
Address	2 NORTH BREAKERS ROW, PHN2
City-State-Zip:	PALM BEACH FL 33480

Title	D
Name	BLOCK, MICHAEL H
Address	2 NORTH BREAKERS ROW, PHN2
City-State-Zip:	PALM BEACH FL 33480

Title	D
Name	BLOCK CASDIN, SUSAN S
Address	2 NORTH BREAKERS ROW, PHN2
City-State-Zip:	PALM BEACH FL 33480

Title	O
Name	ENGLEBARDT, JANE S
Address	166 EAST 61ST STREET, SUITE 5H
City-State-Zip:	NEW YORK NY 10065

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: JANE S ENGLEBARDT**OFFICER****02/24/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date