# DOCUMENT# N13000006252

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: ISENBERG FAMILY CHARITABLE FOUNDATION, INC.

#### **Current Principal Place of Business:**

2 N BREAKERS ROW #S25 PALM BEACH, FL 33480

#### **Current Mailing Address:**

P.O. BOX 351 PALM BEACH, FL 33480 US

## FEI Number: 46-3176081

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US Certificate of Status Desired: Yes

FILED

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 :**

Title	DIRECTOR	Title	DIRECTOR
Name	FREEMAN, DAVID	Name	ISENBERG, DIANE S
Address	2 N BREAKERS ROW #S25	Address	2 N BREAKERS ROW #S25
City-State-Zip:	PALM BEACH FL 33480	City-State-Zip:	PALM BEACH FL 33480
Title Name Address City-State-Zip:	DIRECTOR DUMONT, ROBERT LOUIS 7 TANGLEWYLDE AVENUE AARTMENT 4D BRONXVILLE NY 10706	Title Name Address City-State-Zip:	DIRECTOR EVANGELISTA, ROSE 7 SPINNAKER COURT NORTHPORT NY 11768
Title	DIRECTOR	Title	DIRECTOR
Name	NEICHIN, GREG A	Name	FREEMAN, STEFAN I
Address	49 BERKLEY AVENUE	Address	C/O 7 SPINNAKER COURT
City-State-Zip:	SAN ANSELMO CA 94960	City-State-Zip:	NORTHPORT NY 11768

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: ROSE EVANGELISTA

DIRECTOR

02/11/2019

Date

Electronic Signature of Signing Officer/Director Detail

Date