

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06257

**FILED**  
**Feb 18, 2013**  
**Secretary of State**  
**CC5387362534**

**Entity Name:** THE MARTY LYONS FOUNDATION, INC.

**Current Principal Place of Business:**

326 W 48TH STREET  
3RD FLOOR  
NEW YORK, NY 10036

**Current Mailing Address:**

326 W 48TH STREET  
3RD FLOOR  
NEW YORK, NY 10036

**FEI Number: 13-3146696**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

LYONS, RICHARD  
2013 RAVEN MANOR DRIVE  
DOVER, FL 33527 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 C  
Name LYONS, MARTY  
Address C/O 326 WEST 48TH ST.  
City-State-Zip: NEW YORK NY 10036

Title P  
Name MILLER, RICHARD  
Address C/O 326 WEST 48TH ST.  
City-State-Zip: NEW YORK NY 10036

Title T  
Name DUPRE, EDWARD  
Address C/O 326 WEST 48TH ST.  
City-State-Zip: NEW YORK NY 10036

Title S  
Name DEFRANZA, JOHN  
Address C/O 326 WEST 48TH ST  
City-State-Zip: NEW YORK NY 10036

*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: EDWARD DUPRE**

**TREASURER**

**02/18/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date