

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007773

**Entity Name:** PAUL & ANNETTA HIMMELFARB FOUNDATION, INC.

**FILED**  
**Feb 10, 2015**  
**Secretary of State**  
**CC2200446383**

**Current Principal Place of Business:**

1240-A UPSHUR STREET, NW  
WASHINGTON, DC 20011

**Current Mailing Address:**

1240-A UPSHUR STREET, NW  
WASHINGTON, DC 20011 US

**FEI Number: 52-0784206**

**Certificate of Status Desired: No**

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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 ED/T  
Name PRESTON, MICHAEL E  
Address 9525 LAGERSFIELD CIRCLE  
City-State-Zip: VIENNA VA 22181-6180

Title D/P  
Name HIMMELFARB, PAUL  
Address 8109 HACKAMORE DRIVE  
City-State-Zip: POTOMAC MD 20854

Title D/V  
Name NAIMAN, NORMA L  
Address 3703 BLOOMSBURY COURT  
City-State-Zip: SILVER SPRINGS MD 20906

Title D/S  
Name HESTER, LAUREN K  
Address 20633 EAGLE SPRINGS DRIVE  
City-State-Zip: LEESBURG VA 20175

Title D  
Name ULANOW, LISA H  
Address 912 RESERVE CHAMPION DRIVE  
City-State-Zip: ROCKVILLE MD 20877

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL E PRESTON**

**EXECUTIVE DIRECTOR**

**02/10/2015**

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

\_\_\_\_\_  
Date