

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 08, 2004  
Secretary of State**

DOCUMENT# P14170

Entity Name: SAFER FOUNDATION, INC.

**Current Principal Place of Business:**

571 WEST JACKSON BLVD.  
CHICAGO, IL 60661

**New Principal Place of Business:**

**Current Mailing Address:**

571 WEST JACKSON BLVD.  
CHICAGO, IL 60661

**New Mailing Address:**

FEI Number: 36-2762168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**OFFICERS AND DIRECTORS:**

Title: ACD ( ) Delete  
Name: KANTER, ALLEN  
Address: 571 W. JACKSON BLVD  
City-St-Zip: CHICAGO, IL

Title: T ( ) Delete  
Name: FAULHABER, JOHN,  
Address: 571 WEST JACKSON BLVD.  
City-St-Zip: CHICAGO, IL

Title: S ( ) Delete  
Name: SIEGEL, ARNOLD,  
Address: 571 WEST JACKSON BLVD.  
City-St-Zip: CHICAGO, IL

Title: DO ( ) Delete  
Name: STEPHEN GORNY,  
Address: 571 W JACKSON  
City-St-Zip: CHICAGO, IL 60661

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEPHEN GORNY

DO

01/08/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date