2002 UNIFORM BUSINESS REPORT (UBR) **FILED** May 01, 2002 8:00 am & Secretary of State **DOCUMENT # 854565** 1. Entity Name 05-01-2002 91523 042 ****70.00 AMERICAN LIVER FOUNDATION, INC. Principal Place of Business Mailing Address 75 MAIDEN LANE, STE, 603 1425 POMPTON AVE. NEW YORK NY 10038 CEDAR GROVE NJ 07009 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-2883000 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) EDDY, MARIA 101 AMERICAN CENTER PLACE, STE. 201 **TAMPA FL 33619** City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 **PCEO** TITLE (9/04) ☐ Delete TITLE Change Addition BROWNSTEIN, ALAN P NAME ALAKI BROWN STEIN NAME ME MAIDENLAME, SUITE 603 STREET ADDRESS 75 MAIDEN LANE STREET ADDRESS CITY-ST-ZIP IEW YORK, NY 10038 **NEW YORK NY 10038** CITY-ST-ZIP TITLE Delete TITI F ☐ Change ☐ Addition BROWNSTEIN, ALAN P NAME NAME SEE ATTACHED BOARD OF DIRECTORS LIST-STREET ADDRESS 75 MAIDEN LANE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **NEW YORK NY 10038** TITLE CD ☐ Delete TITLE Change ☐ Addition NAME BERK, PAUL D NAME STREET ADDRESS **75 MAIDEN LANE** STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10038** CITY-ST-ZIP SD ☐ Delete TITLE Change ☐ Addition LYONS, WILLIAM T NAME STREET ADDRESS **75 MAIDEN LANE** STREET ADDRESS CITY-ST-7IP **NEW YORK NY 10038** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME JORDAN, JEFFREY F NAME **75 MAIDEN LANE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10038** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change **Addition** GERALD TECLINSKI NAME NAME 75 MAIDEN LANE, SUITE 603 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK, NY

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachmen

SIGNATURE:

ALD JEGLINSKI, CUO/CFU ZIZIBLO 8 1000

ATTACH # 85,4565/643708



April 19, 2002

Division Of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: Charitable Organization Registration Renewal – American Liver Foundation Document # 854565

Dear Sir or Madam:

Please find enclosed the following documents for our charitable organization registration in The State of Florida:

- Uniform Business Report with attachment:
 - Board of Directors' List
- \$70 Check Filing and Certificate of Status Fees

Kindly send us a letter/certificate confirming the renewal of our registration. Your attention to this matter is very much appreciated.

If you have any questions/concerns with the enclosed documents please call me at 212.668.1000.

Thank you.

Sincerely,

Karla Roman
Office of the COO/CFO
American Liver Foundation

Encl.

cc. file