

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001873

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: AMERICAN FRIENDS OF TEL AVIV UNIVERSITY, INC.

**Current Principal Place of Business:**

39 BROADWAY  
1510  
NEW YORK, NY 10006

**New Principal Place of Business:**

**Current Mailing Address:**

39 BROADWAY  
1510  
NEW YORK, NY 10006

**New Mailing Address:**

FEI Number: 13-1996126      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

AUFZIEN, ALAN  
5100 WHITE OAK LANE  
FORT LAUDERDALE, FL 33319      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: C      ( ) Delete  
Name: SCHRAYER, ROBERT M  
Address: 1701 GOLF ROAD  
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: T      ( ) Delete  
Name: COHEN, WILLIAM F  
Address: 53 EAST 34TH STREET  
City-St-Zip: PATERSON, NJ 07514

Title: P      ( ) Delete  
Name: WITKIN, SAM  
Address: 904 JAMES STREET  
City-St-Zip: AUSTIN, TX 78704

Title: D      ( ) Delete  
Name: AUFZIEN, ALAN L  
Address: 60 US HIGHWAY 46 EAST 2ND FLOOR  
City-St-Zip: FAIRFIELD, NJ 07004

Title: D      ( ) Delete  
Name: BRILL, GABY  
Address: 7405 ORANGEWOOD LANE  
City-St-Zip: BOCA RATON, FL 33433

Title: CFO      ( ) Delete  
Name: WEIN, AHRON  
Address: 632 JUNARD BLVD  
City-St-Zip: WEST HEMPSTEAD, NY 11552

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

Title: C      (X) Change ( ) Addition  
Name: COHEN, WILLIAM F  
Address: 53 EAST 34TH STREET  
City-St-Zip: PATERSON, NJ 07514

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

Title: P      (X) Change ( ) Addition  
Name: KRINSKY, RONI  
Address: 360 EAST 88TH STREET  
City-St-Zip: NEW YORK, NY 10128

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 exemption stated in Chapter 119, 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: AHRON WEIN

Electronic Signature of Signing Officer or Director

CFO

01/14/2008

\_\_\_\_\_ Date