

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001873

FILED
Jan 11, 2009
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: COHEN, WILLIAM F
Address: 53 EAST 34TH STREET
City-St-Zip: PATERSON, NJ 07514

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

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

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: () 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:

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

CFO

01/11/2009

Electronic Signature of Signing Officer or Director

Date