

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005047

FILED
Feb 11, 2008
Secretary of State

Entity Name: GORDON FAMILY FOUNDATION, INC.

Current Principal Place of Business:

1835 E. HALLANDALE BCH. BLVD.
#483
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1835 E. HALLANDALE BCH. BLVD.
#483
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 65-0708527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUDNIK, STACY
C/O MELLON WAYNE CARSON
910 E LAS OLAS BLVD STE 200
FORT LAUDERDALE, FL 33301 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: P () Delete
Name: GORDON, GAIL
Address: 1835 E. HALLENDALE BCH BLVD. #483
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: STUDNIK, STACY
Address: 1835 E. HALLENDALE BCH. BLVD. #483
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: STUDNIK, SHANI
Address: 1835 E. HALLENDALE BCH. BLVD. #483
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: GORDON, JASON
Address: 1835 E. HALLENDALE BCH. BLVD. #483
City-St-Zip: HALLANDALE, FL 33009

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 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: STACY STUDNIK

Electronic Signature of Signing Officer or Director

DIR.

02/11/2008

Date