## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000010031

FILED Apr 25, 2007 Secretary of State

Entity Name: MARK EISENBERG FAMILY FOUNDATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	MUNITY DRIVE _M BEACH, FL 33411				
Current Mailing Address:			New Mailing Address:		
	MUNITY DRIVE _M BEACH, FL 33417				
FEI Number	20-1842894 FEI No	ımber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Current	Registered Agent:	Name and Address	of New Registered Agent:	
4601 COM WEST PA The above	MICHELLE G MUNITY DRIVE LM BEACH, FL 33417 named entity submits of Florida.		ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RF.				
		ature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name:	T () Delete BAKLOR, SANFORD TR	USTEE	Title: Name:	( ) Change ( ) Addition	
Address: City-St-Zip:	5 VIA SUNNY PALM BEACH, FL 3348	0	Address: City-St-Zip:		
				( ) Change( ) Addition	
City-St-Zip: Title: Name: Address:	PALM BEACH, FL 3348  D ( ) Delete LEVY, MARK TRUSTEE 15220 PALM WOOD RD	S, FL 33410 RUSTEE E	City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	PALM BEACH, FL 3348  D ( ) Delete LEVY, MARK TRUSTEE 15220 PALM WOOD RD PALM BEACH GARDENS  S ( ) Delete WASCH, MICHELLE G T 4601 COMMUNITY DRIV	S, FL 33410 RUSTEE E . 33417 USTEE	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:		

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: MICHELLE G. WASCH S 04/25/2007