


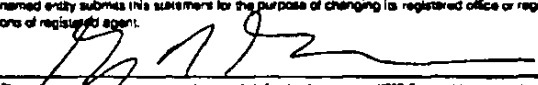

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2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N06000011624			
1. Entry Name GERSON FAMILY FOUNDATION, INC.			
Principal Place of Business 1845 CLEVELAND RD MIAMI BEACH, FL 33141		Mailing Address 1845 CLEVELAND RD MIAMI BEACH, FL 33141	
2. Principal Place of Business - No P.O. Box # Above		3. Mailing Address Above	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number 14-1982298		Applied For Not Applicable	
5. Certificate of State Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. ONE SOUTHEAST THIRD AVE SUITE 2600 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name: GARY GERSON Street Address (P.O. Box Number is Not Acceptable): 666-71 st ST Miami Beach, FLA 3314 City: FL Zip Code	
8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: 		DATE: 4/23/07	
Filing Fee is \$41.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete GARY GERSON 1845 CLEVELAND RD MIAMI BEACH, FLA 33141	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	* See Attachment for list of Directors *	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of this report, or on an attachment with an appropriate name all other the empowered.			
SIGNATURE: 		DATE: 4/2/07 (305) 868-3600	

As per telephone conversation with Gary Gerson on 9/5

29/5

ATTACHMENT 66020368

14-1982298

GERSON FAMILY FOUNDATION INC

#NO 6000011624

Form 990-PF Part VIII - List of Officers, Directors Trustees and Foundation Managers Statement 1

DIRECTORS

Name and Address	Title and Avrg Hrs/Wk	Compensation	Employee Ben Contrib	Plan Expense	Account
GARY GERSON 1845 CLEVELAND ROAD MIAMI BEACH, FL 33141	DIRECTOR 0.00	0.	0.	0.	0.
NIETY GERSON 1845 CLEVELAND ROAD MIAMI BEACH, FL 33141	DIRECTOR 0.00	0.	0.	0.	0.
DENISE DESAULIERS 525 WEST 47th STREET MIAMI BEACH, FL 33140	DIRECTOR 0.00	0.	0.	0.	0.
PAMELA RHODES 12851 STIRLING ROAD FT.LAUDERDALE, FL 33330	DIRECTOR 0.00	0.	0.	0.	0.
MELISSE BURSTEIN 4507 SHERIDAN AVENUE MIAMI BEACH, FL 33140	DIRECTOR 0.00	0.	0.	0.	0.
HERSHEL GERSON 2201 OCEAN AVENUE, APT.1 VENICE, CA 90291	DIRECTOR 0.00	0.	0.	0.	0.
		0.	0.	0.	0.