

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**FILED
Apr 20, 2009
Secretary of State**

DOCUMENT# N28114

Entity Name: BENNETT M. LIFTER FOUNDATION, INC.

Current Principal Place of Business:17760 NW 2ND AVENUE
SUITE 200
MIAMI, FL 33169**New Principal Place of Business:****Current Mailing Address:**17760 NW 2ND AVENUE
STE 200
MIAMI, FL 33169**New Mailing Address:**

FEI Number: 65-0080906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:LIFTER, BENNETT M.
17760 NW 2ND AVE #200
MIAMI, FL 33169 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: D () Delete
Name: LIFTER, BENNETT M.
Address: 17760 NW 2ND AVE #200
City-St-Zip: MIAMI, FL 33169Title: D () Delete
Name: LIFTER, BAYLA
Address: 17760 NW 2ND AVE #200
City-St-Zip: MIAMI, FL 33169Title: D () Delete
Name: WOLIN, NANCY
Address: 17760 NW 2ND AVE
City-St-Zip: MIAMI, FL 33169**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:

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: BENNETT M LIFTER

MR

04/20/2009

Electronic Signature of Signing Officer or Director

Date