2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # N33461** Mar 20, 2000 8:00 am Secretary of State 1. Entity Name THE BERNARD ROTHFELD CHILDREN'S FOUNDATION, INC. 03-20-2000 90048 002 ****61.25 Principal Place of Business Mailing Address 7676 GRANVILLE DR. 7676 GRANVILLE DR. BUILDING E BUILDING E 00030799 TAMARAC FL 33319 TAMÀRAC FL 33321-8755 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0143398 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **RUTH ROTHFELD** 7676 GRANVILLE DR. BUILDING E City Zip Code TAMARAC FL 33319 FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS I 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change ☐ Addition NAME rothfeld, ruth NAME STREET ADDRESS 7676 GRANVILLE DR. BLDG E. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Tamarac fl</u> TITLE Delete TITLE ☐ Change ☐ Addition NAME ROTHFELD, ERIC A. NAME STREET ADDRESS 111 WEST 40TH STREET, 22ND FLOOR STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP <u>new York ny -</u> IIII F Delete TITLE ☐ Change ☐ Addition NAME GOLDMAN, HAZEL NAME STREET ADDRESS 10501 SW 71 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMLFL 33156 TITLE ☐ Addition ☐ Defete TITLE Change NAME Brad Goldman STREET ADDRESS STREET ADDRESS 1032 South 19 Street CITY-ST-ZIP CITY-ST-ZIP Arlington, Virginia 22202 TITLE ☐ Delete TITLE Channe Addition NAME NAME Evan Goldman STREET ADDRESS STREET ADDRESS 910 west avenue-apt 1412 CITY-ST-ZIP CITY-ST-ZIP <u>miami beach. florida</u> TITLE Delete Addition TITLE ☐ Change NAME NAME Richard Rothfeld STREET ADDRESS STREET ADDRESS 791 Park Avenue 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report be frue 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 if changed, or on an attachment with an address, with all other like empowered SALOW! TEWU SIGNATURE:

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR