

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 06, 2010
Secretary of State

Entity Name: THE HYMAN A. AND IDA KIRSNER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

5100 TOWN CENTER CIRCLE
SUITE 400
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

5100 TOWN CENTER CIRCLE
SUITE 400
BOCA RATON, FL 33486 US

New Mailing Address:

FEI Number: 65-0711872 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KIRSNER, MARVIN A
5100 TOWN CENTER CIRCLE
SUITE 400
BOCA RATON, FL 33486 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
Name: KIRSNER, RONALD
Address: 34 STAR ISLAND
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: KIRSNER, IDA
Address: 34 STAR ISLAND
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: KIRSNER, HARRY M
Address: 34 STAR ISLAND
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: GOLDBERG, DIANE A
Address: 34 STAR ISLAND
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: KIRSNER, MARVIN A
Address: 34 STAR ISLAND
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: KIRSNER, STEVEN A
Address: 34 STAR ISLAND
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: MARVIN KIRSNER

D

01/06/2010

Electronic Signature of Signing Officer or Director

_____ Date