# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 26, 2007**
**Secretary of State**

DOCUMENT# N93000002908

**Entity Name:** JOSEPH R. NAROT ENDOWMENT FUND, INC.

**Current Principal Place of Business:**

137 NE 19TH ST
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

137 NE 19TH ST
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number: 65-0565251** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BERMONT, PETER L
2800 PONCE DE LEON BLVD.
SUITE 1300
CORAL GABLES, FL 33131 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: TATE, STANLEY
Address: 1175 N.E. 125 STREET #102
City-St-Zip: NORTH MIAMI, FL 33161

Title: D (X) Delete
Name: BERMONT, PETER L
Address: 1 S.E. THIRD AVE. #2950
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: OROVITZ, MICHAEL D
Address: 1311 98TH ST
City-St-Zip: BAY HARBOUR ISLANDS, FL 33154

Title: D ( ) Delete
Name: JACOBS, JANE
Address: 21210 HIGHLAND LAKES BLVD.
City-St-Zip: NORTH MIAMI BEACH, FL 33179

**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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STANLEY TATE D 03/26/2007

Electronic Signature of Signing Officer or Director — Date