

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45161

Entity Name: WILL AND ANN EISNER FAMILY FOUNDATION, INC.**Current Principal Place of Business:**9419 ASTON GARDENS CT
306
PARKLAND, FL 33076**Current Mailing Address:**50 EAST RIDGEWOOD AVE. #367
RIDGEWOOD, NJ 07450 US**FEI Number:** 65-0309613**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EISNER, ANN W
9419 ASTON GARDENS CT., APT. 306
PARKLAND, FL 33076 US*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

Officer/Director Detail :Title DIRECTOR
Name GROPPER, RICHARD M
Address 40 PARK AVENUE
City-State-Zip: NEW YORK NY 10016Title DIRECTOR
Name WARNER, CAROLYN
Address 115 CENTRAL PARK WEST
City-State-Zip: NEW YORK NY 10023Title DIRECTOR, TREASURER, PRESIDENT
Name GROPPER, CARL M
Address 214 EMMETT PLACE
City-State-Zip: RIDGEWOOD NJ 07450Title DIRECTOR
Name GROPPER, ALLAN L
Address 115 CENTRAL PARK WEST
City-State-Zip: NEW YORK NY 10023Title DIRECTOR
Name EISNER, ANN W
Address 9419 ASTON GARDENS CT., APT. 306
City-State-Zip: PARKLAND FL 33076Title DIRECTOR
Name GROPPER, ANDREW J
Address 116-25 UNION TURNPIKE
City-State-Zip: FOREST HILLS NY 11325Title DIRECTOR, SECRETARY
Name GROPPER, NANCY R
Address 214 EMMETT PLACE
City-State-Zip: RIDGEWOOD NJ 07450

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: CARL M. GROPPER

PRESIDENT

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date