

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719156

FILED
Apr 03, 2007
Secretary of State

Entity Name: JOSEPH WEINTRAUB FAMILY FOUNDATION, INC.

Current Principal Place of Business:

801 BRICKELL AVE
2470
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

801 BRICKELL AVE
2470
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 59-0975815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEINTRAUB, MICHAEL
801 BRICKELL AVE
STE 2470
MIAMI, 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: PD () Delete
Name: WEINTRAUB, MICHAEL
Address: 801 BRICKELL AVE STE 2470
City-St-Zip: MIAMI, FL 33131 US

Title: AS () Delete
Name: TAM, CHRISTINA K
Address: 801 BRICKELL AVE STE 2470
City-St-Zip: MIAMI, FL 33131 US

Title: D () Delete
Name: WEINTRAUB, BARBARA A
Address: 801 BRICKELL AVE STE 2470
City-St-Zip: MIAMI, FL 33131 US

Title: D () Delete
Name: GAUNTT, MILES
Address: 801 BRICKELL AVE STE 2470
City-St-Zip: MIAMI, FL 33131 US

Title: VTS () Delete
Name: SPOONER, SANDRA S
Address: 801 BRICKELL AVE STE 2470
City-St-Zip: MIAMI, FL 33131 US

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:

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: SANDRA S. SPOONER

VTS

04/03/2007

Electronic Signature of Signing Officer or Director

Date