

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSFILED
Mar 27 1997 8:00am
Secretary of State**DOCUMENT # 721995 (9)**

1. Corporation Name

TISCH FOUNDATION, INC.

Principal Place of Business

Mailing Address

C/O BARRY BLOOM
667 MADISON AVE.
NEW YORK NY 10021-8087C/O BARRY BLOOM
667 MADISON AVE.
NEW YORK NY 10021-80293. Date Incorporated or Qualified
11/02/19713a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME P/D
STREET ADDRESS TISCH, PRESTON R
CITY - ST - ZIP 3 TIMBER TRAIL
RYE NY 105801.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME V/D
STREET ADDRESS TISCH, LAURENCE A.
CITY - ST - ZIP NO. MANURSING ISLAND
RYE NY 105802.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE ☒ DELETE
NAME SDT
STREET ADDRESS BEATUS, E. JACK
CITY - ST - ZIP 31 BLOOMINGDALE DRIVE
SCARSDALE NY 105833.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP4.1 TITLE ☐ Change ☒ Addition
4.2 NAME S/T
4.3 STREET ADDRESS BLOOM, BARRY L.
4.4 CITY - ST - ZIP 46 WOODMERE DRIVE
SUMMIT, NJ 07901TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Barry L. Bloom

(212) 545-2930

CR2E037 (9/96)