

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721995

FILED  
Jan 23, 2012  
Secretary of State

Entity Name: TISCH FOUNDATION, INC.

## Current Principal Place of Business:

C/O BARRY L BLOOM  
655 MADISON AVE, 19TH FLOOR  
NEW YORK, NY 10065 US

## New Principal Place of Business:

C/O BARRY L BLOOM  
655 MADISON AVE, 11TH FLOOR  
NEW YORK, NY 10065 US

## Current Mailing Address:

C/O BARRY L BLOOM  
655 MADISON AVE, 19TH FLOOR  
NEW YORK, NY 10065 US

## New Mailing Address:

C/O BARRY L BLOOM  
655 MADISON AVE, 11TH FLOOR  
NEW YORK, NY 10065 US

FEI Number: 59-1002844

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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: ST  
Name: BLOOM, BARRY L  
Address: 655 MADISON AVE, 11TH FLOOR  
City-St-Zip: NEW YORK, NY 10065

Title: V  
Name: KRINSKY, MARK J  
Address: 655 MADISON AVE, 11TH FLOOR  
City-St-Zip: NEW YORK, NY 10065

Title: P  
Name: TISCH, JOAN H  
Address: 655 MADISON AVE, 11TH FLOOR  
City-St-Zip: NEW YORK, NY 10065

Title: P  
Name: TISCH, WILMA S  
Address: 655 MADISON AVE, 11TH FLOOR  
City-St-Zip: NEW YORK, NY 10065

Title: V  
Name: TISCH, ANDREW H  
Address: 655 MADISON AVE, 11TH FLOOR  
City-St-Zip: NEW YORK, NY 10065

Title: V  
Name: TISCH, DANIEL R  
Address: 655 MADISON AVE, 11TH FLOOR  
City-St-Zip: NEW YORK, NY 10065

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: BARRY L. BLOOM

ST

01/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date