

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732287

FILED
Feb 25, 2009
Secretary of State

Entity Name: ALEXANDER MUSS INSTITUTE FOR ISRAEL EDUCATION, INC.

Current Principal Place of Business:

78 RANDALL AVENUE
ROCKVILLE CENTRE, NY 11570 US

New Principal Place of Business:

Current Mailing Address:

78 RANDALL AVENUE
ROCKVILLE CENTRE, NY 11570 US

New Mailing Address:

FEI Number: 59-0173782 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SOKOL, JERRY
201 SOUTH BISCAYNE BLVD
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: CD () Delete
Name: MUSS, STEPHEN
Address: 1800 WEST 25TH STREET
City-St-Zip: MIAMI BEACH, FL 3314

Title: STD () Delete
Name: WERNER, ROBERT
Address: 3000 ISLAND BLVD. APT. 3001
City-St-Zip: AVENTURA, F 33160

Title: VD () Delete
Name: LEDER, SEAN
Address: 6015 LELAC RD.
City-St-Zip: BOCA RATON, FL 33496

Title: VD () Delete
Name: BEBCHICK, LEONARD
Address: 6321 LENNOX ROAD
City-St-Zip: BETHESDA, MD 20817

Title: VD () Delete
Name: GOLDNER, ALAN
Address: 18 MAPLE TERRACE
City-St-Zip: MAPLEWOOD, NJ 07040

Title: VD () Delete
Name: MUSS, SANDRA
Address: 1800 WEST 25TH STREET
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: WERNER, ROBERT
Address: 3000 ISLAND BLVD. APT. 3001
City-St-Zip: AVENTURA, FL 33160

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 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: ROBERT WERNER

STD

02/25/2009

Electronic Signature of Signing Officer or Director

Date