2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001873

FILED Feb 12, 2007 Secretary of State

Entity Name: AMERICAN FRIENDS OF TEL AVIV UNIVERSITY, INC.

Current Principal Place of Business: New Principal Place of Business: 39 BROADWAY 1510 NEW YORK, NY 10006 **New Mailing Address: Current Mailing Address:** 39 BROADWAY 1510 NEW YORK, NY 10006 FEI Number: 13-1996126 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AUFZIEN, ALAN 5100 WHITE OAK LANE FORT LAUDERDALE, FL 33319 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete TAUBER, JOEL D SCHRAYER, ROBERT M. Name: Name: 27777 FRANKLIN ROAD SUITE 1850 Address: 1701 GOLF ROAD Address: City-St-Zip: SOUTHFIELD, MI 48034 City-St-Zip: ROLLING MEADOWS, IL 60008 Title: Title: (X) Change () Addition () Delete Name: YORAN, SHALOM Name: COHEN, WILLIAM F Address: 12 COVE LANE Address: 53 EAST 34TH STREET KING POINT, NY 11024 City-St-Zip: City-St-Zip: PATERSON, NJ 07514 Title: () Delete Title: (X) Change () Addition WITKIN, SAM Name: WITKIN, SAM Name: 8540 ADIRONDACK TRAIL #24 904 JAMES STREET Address: Address: City-St-Zip: AUSTIN, TX 78759 City-St-Zip: AUSTIN, TX 78704 Title: () Delete Title: () Change () Addition Name: AUFZIEN, ALAN L Name: 60 US HIGHWAY 46 EAST 2ND FLOOR Address: Address: City-St-Zip: FAIRFIELD, NJ 07004 City-St-Zip: Title: () Delete Title: () Change () Addition BRILL, GABY Name: Name: 7405 ORANGEWOOD LANE Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: Title: () Delete Title: (X) Change () Addition WEIN, AHRON WEIN. AHRON Name: Name: Address: 632 JURARD BLVD Address: 632 JUNARD BLVD WEST HEMPSTEAD, NY 11552 WEST HEMPSTEAD, NY 11552 City-St-Zip: 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: AHRON WEIN CFO 02/12/2007