2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 22, 2005 8:00 am Secretary of State · . DOCUMENT # F02000002306 04-22-2005 90311 028 ****61.25 REUBEN AND MOLLIE GORDON FOUNDATION, INC. Principal Place of Business 3170 N. FEDERAL HWY Mailing Address 3170 N. FEDERAL HWY #105 LIGHTHOUSE POINT, FL 33064 LIGHTHOUSE POINT, FL 33064 US US 2. Principal Place of Business 3. Mailing Address 231 Goolsby Blud Buld ydalood 156 Suite, Apt. #, etc. Suite, Apt. #, etc. 04072005 Chg-NP CR2E037 (10/03) Applied For 4. FEI Number 23-6251826 City & State City & State Deerfield Beach FL Deerfield Beach FL Not Applicable Country _ \$8.75 Additional 33²⁰44ã 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SICILIANO, THOMAS V 980 NORTH FEDERAL HIGHWAY, SUITE 440 Street Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33432 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Change Addition TITLE Delete Lieberman, Fred LIEBERMAN, FRED NAME MAKE 3170 N. FEDERAL HWY, SUITE 105 231 Goolsby Blud. Deerfield Beach FL 33442 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064 CITY-ST-7IP **Change** ☐ Addition TITLE Delete TITLE Malik, Pamela J. MALIK, PAMELA J NAME NAME 231 Boolsby Blud. Deerfield-Beach FL 33442 STREET ADDRESS 3170 N. PEDERAL HWY, SUITE 105 STREET ADDRESS LIGHTHOUSE POINT, FL 33064 CITY-ST-ZIP CITY-ST-ZIP TITLE D Change TITL F ☐ Addition Delete Lieberman Harry 2324 Asbudy Aug. Ocean City, NJ 08226 LIEBERMAN, HARRY NAME NAME 1116 MASON AVENUE STREET ADDRESS STREET ADDRESS DREXEL HILL, RA 19026 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TIBLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

amela a Malik CICNIATI IDE.

04-08-05