

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004838

FILED
Sep 03, 2009
Secretary of State

Entity Name: BROOKLYN COLLEGE FOUNDATION, INC.

Current Principal Place of Business:

2900 BEDFORD AVENUE, 1122 INGERSOLL HALL
BROOKLYN, NY 11210

New Principal Place of Business:

Current Mailing Address:

2900 BEDFORD AVENUE, 1122 INGERSOLL HALL
BROOKLYN, NY 11210

New Mailing Address:

FEI Number: 11-1904329 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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:

Title: C () Delete
Name: MAGNER, MARJORIE
Address: 2900 BEDFORD AVENUE, 1122 INGERSOLL HALL
City-St-Zip: BROOKLYN, NY 11210

Title: ED () Delete
Name: SILLEN, ANDREW
Address: 2900 BEDFORD AVENUE, 1122 INGERSOLL HALL
City-St-Zip: BROOKLYN, NY 11210

Title: S () Delete
Name: RAND, MADELON
Address: 2900 BEDFORD AVENUE, 1122 INGERSOLL HALL
City-St-Zip: BROOKLYN, NY 11210

Title: T () Delete
Name: GARIL, BERNARD
Address: 2900 BEDFORD AVENUE, 1122 INGERSOLL HALL
City-St-Zip: BROOKLYN, NY 11210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANDREW SILLEN

ED

09/03/2009

Electronic Signature of Signing Officer or Director

Date