

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002947

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** THE STATUE OF LIBERTY - ELLIS ISLAND FOUNDATION, INC.

**Current Principal Place of Business:**

17 BATTERY PL  
210  
NEW YORK, NY 10004

**New Principal Place of Business:**

**Current Mailing Address:**

17 BATTERY PL  
210  
NEW YORK, NY 10004

**New Mailing Address:**

**FEI Number:** 13-3118415

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD  
Name: BRIGANTI, STEPHEN A  
Address: 17 BATTERY PL 210  
City-St-Zip: NEW YORK, NY 10004

Title: S  
Name: KELLEY, GARY E  
Address: 17 BATTERY PL 210  
City-St-Zip: NEW YORK, NY 10004

Title: CD  
Name: WEAVER, PAUL  
Address: 17 BATTERY PL 210  
City-St-Zip: NEW YORK, NY 10004

Title: D  
Name: MAY, WILLIAM F  
Address: 17 BATTERY PL 210  
City-St-Zip: NEW YORK, NY 10004

Title: D  
Name: BARRARA, MICHAEL  
Address: 17 BATTERY PL 210  
City-St-Zip: NEW YORK, NY 10004

Title: D  
Name: JURGENSEN, KAREN  
Address: 17 BATTERY PL 210  
City-St-Zip: NEW YORK, NY 10004

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: GARY E. KELLEY

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02/16/2010

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

\_\_\_\_\_  
Date