

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004062

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: 69TH STREET, INC.

**Current Principal Place of Business:**

C/O WILLNER REALTY AND DEVELOPMENT  
123 COULTER AVENUE, SUITE 200  
ARDMORE, PA 19003

**New Principal Place of Business:**

**Current Mailing Address:**

C/O WILLNER REALTY AND DEVELOPMENT  
123 COULTER AVENUE, SUITE 200  
ARDMORE, PA 19003

**New Mailing Address:**

FEI Number: 23-2965914      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SEIF, EVAN D ESQ.  
2800 PONCE DE LEON BLVD., SUITE 1125  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: WILLNER, MORRIS S  
Address: 123 COULTER AVENUE, SUITE 200  
City-St-Zip: ARDMORE, PA 19003

Title: VT ( ) Delete  
Name: WILLNER, MICHAEL B  
Address: 123 COULTER AVENUE, SUITE 200  
City-St-Zip: ARDMORE, PA 19003

Title: S ( ) Delete  
Name: WILLNER, BENJAMIN P  
Address: 123 COULTER AVENUE, SUITE 200  
City-St-Zip: ARDMORE, PA 19003

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL B. WILLNER

VT

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date