

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004379

FILED
Jun 17, 2009
Secretary of State

Entity Name: DIANA WASSERMAN MEMORIAL FUND, INC.

Current Principal Place of Business:

600 S.E. 3RD. AVE.
9TH FLOOR
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

C/O SUSANNE J. HOLLANDER
30 NORTH LASALLE STREET, SUITE 3900
CHICAGO, IL 60602

New Mailing Address:

FEI Number: 65-0325725 **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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCD () Delete
Name: RUSNAK, DENISE
Address: 600 S.E 3RD AVE., 9TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DVC () Delete
Name: LIPSCOMB, GWEN
Address: 600 S.E. 3RD AVE., 9TH FLOOR
City-St-Zip: FT LAUDERDALE, FL

Title: STD () Delete
Name: WASSERMAN, JOSEPH
Address: 2100 BOAT SWAIN PLACE
City-St-Zip: WILMINGTON, NC 28405

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

SIGNATURE: JOSEPH WASSERMAN

STD

06/17/2009

Electronic Signature of Signing Officer or Director

Date