

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 11, 2009  
Secretary of State**

DOCUMENT# N01000005623

Entity Name: LEIBOWITZ FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

903 GUI SANDO DE AVILA  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

903 GUI SANDO DE AVILA  
TAMPA, FL 33613

**New Mailing Address:**

FEI Number: 59-3736869      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEIBOWITZ, EDWARD R  
903 GUI SANDO DE AVILA  
TAMPA, FL 33613      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: D      ( ) Delete  
Name: LEIBOWITZ, EDWARD R  
Address: 903 GUI SANDO DE AVILA  
City-St-Zip: TAMPA, FL 33613

Title: D      ( ) Delete  
Name: LEIBOWITZ, BLOSSOM M  
Address: 1039 GUI SANDO DE AVILA  
City-St-Zip: TAMPA, FL 33613

Title: D      ( ) Delete  
Name: KUHN, JASON  
Address: 16406 MILAN DE AVILA  
City-St-Zip: TAMPA, FL 33613

Title: D      ( ) Delete  
Name: KUHN, SUSAN L  
Address: 16406 MILAN DE AVILA  
City-St-Zip: TAMPA, FL 33613

Title: D      ( ) Delete  
Name: LEIBOWITZ, DAVID S  
Address: 11 QUAKER ROAD  
City-St-Zip: SHORT HILLS, NJ 07078

Title: D      ( ) Delete  
Name: LEIBOWITZ, STACEY B  
Address: 11 QUAKER ROAD  
City-St-Zip: SHORT HILLS, NJ 07078

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: KUHN, JASON  
Address: 16404 MILAN DE AVILA  
City-St-Zip: TAMPA, FL 33613

Title: D      (X) Change ( ) Addition  
Name: KUHN, SUSAN L  
Address: 16404 MILAN DE AVILA  
City-St-Zip: TAMPA, FL 33613

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: EDWARD R LEIBOWITZ

D

01/11/2009

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

\_\_\_\_\_  
Date