

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008225

FILED  
Sep 11, 2007  
Secretary of State

**Entity Name:** KATZMAN FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

3872 NE 199 TERRACE  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

1696 NE MIAMI GARDEN DRIVE  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

**FEI Number:** 20-0255604      **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:**

AMERICAN INFORMATION SERVICES, INC.  
ONE SE 3RD AVE, STE 2800  
MIAMI, FL 33131 US

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

CORPDIRECT AGENTS, 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: KEVIN ROBERTS

09/11/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: KATZMAN, CHAIM  
Address: 3872 NE 199 TERRACE  
City-St-Zip: AVENTURA, FL 33180

Title: DVPT ( ) Delete  
Name: KATZMAN, SHULAMIT  
Address: 3872 NE 199 TERRACE  
City-St-Zip: AVENTURA, FL 33180

Title: D ( ) Delete  
Name: GOZLAN, MAURICE  
Address: 6196 NW 11TH COURT  
City-St-Zip: SUNRISE, FL 33313

**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: MAURICE GOZLAN

D

09/11/2007

Electronic Signature of Signing Officer or Director

Date