

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004083

FILED  
Jun 21, 2009  
Secretary of State

**Entity Name:** THE JOSEPH SAMUEL ISICOFF MEMORIAL FUND, INC.

**Current Principal Place of Business:**

3495 NW NORTH RIVER DRIVE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

3495 NW NORTH RIVER DRIVE  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:** 20-1055878      **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:**

ISICOFF, STEVEN  
3495 NW NORTH RIVER DRIVE  
MIAMI, FL 33142

**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: STEVEN ISICOFF

06/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ZELMAN, LUCY  
Address: 11440 SW 102 CT  
City-St-Zip: MIAMI, FL 33176

Title: D, T ( ) Delete  
Name: ISICOFF, ERIC  
Address: 1101 BRICKELL AVE STE 704  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: FEILER, JEFFREY  
Address: 7685 SW 104TH STREET STE 200  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: ULLMAN, SAMUEL C  
Address: 200 S BISCAYNE BLVD STE 4000  
City-St-Zip: MIAMI, FL 33131

Title: D, S ( ) Delete  
Name: ISICOFF, LAUREL M  
Address: 3495 NW NORTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: ZELMAN, LUCY L  
Address: 11440 SW 102 CT  
City-St-Zip: MIAMI, FL 33176

Title: D, T (X) Change ( ) Addition  
Name: ISICOFF, ERIC D  
Address: 1101 BRICKELL AVE STE 704  
City-St-Zip: MIAMI, FL 33131

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

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

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

Title: P ( ) Change (X) Addition  
Name: ISICOFF, STEVEN L  
Address: 3495 NW NORTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33142

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: LAUREL ISICOFF

S

06/21/2009

Electronic Signature of Signing Officer or Director

Date