## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004083

Feb 13, 2010 Secretary of State

**New Principal Place of Business:** 

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

**Current Principal Place of Business:** 

3495 NW NORTH RIVER DRIVE

MIAMI, FL 33142

**Current Mailing Address: New Mailing Address:** 

3495 NW NORTH RIVER DRIVE

MIAMI, FL 33142

FEI Number: 20-1055878 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ISICOFF, STEVEN L 3495 NW NORTH RIVER DRIVE

MIAMI, FL 33142

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:**

ZELMAN, LUCY L Name: Address: 11440 SW 102 CT City-St-Zip: MIAMI, FL 33176

Title:

Name: ISICOFF, ERIC D

Address: 1101 BRICKELL AVE STE 704

City-St-Zip: MIAMI, FL 33131

Title:

FEILER, JEFFREY Name:

7685 SW 104TH STREET STE 200 Address:

City-St-Zip: MIAMI, FL 33156

Title:

Name: ULLMAN, SAMUEL C

200 S BISCAYNE BLVD STE 4000 Address:

City-St-Zip: MIAMI, FL 33131

Title: D. S

ISICOFF, LAUREL M Name:

3495 NW NORTH RIVER DRIVE Address:

City-St-Zip: MIAMI, FL 33142

Title:

ISICOFF STEVEN I Name:

Address: 3495 NW NORTH RIVER DRIVE

City-St-Zip: MIAMI, FL 33142

I hereby 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 all other like empowered.

SIGNATURE: LAUREL ISICOFF SEC 02/13/2010