2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008496

Feb 12, 2007 Secretary of State

Entity Name: DORIS BERNSTEIN FAMILY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

995 SOUTH OCEAN BOULEVARD 400 SOUTH OCEAN BOULEVARD DELRAY BEACH, FL 33483

BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

995 SOUTH OCEAN BOULEVARD 400 SOUTH OCEAN BOULEVARD DELRAY BEACH, FL 33483

BOCA RATON, FL 33432

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

BERNSTEIN, DORIS BERNSTEIN, DORIS

995 SOUTH OCEAN BOULEVARD 400 SOUTH OCEAN BOULEVARD DELRAY BEACH, FL 33483

BOCA RATON, FL 33432 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: D.BERNSTEIN 02/12/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BERNSTEIN, DORIS BERNSTEIN, DORIS Name: Name:

995 SOUTH OCEAN BOULEVARD Address: 400 SOUTH OCEAN BOULEVARD #11 Address:

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: BOCA RATON, FL 33432

Title: Title: () Delete () Change () Addition GOLDSTEIN, LAUREN M Name:

Name: Address: 1045 EAST HERITAGE CLUB CIRCLE Address: City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip:

Title: () Delete Title: (X) Change () Addition BERNSTEIN, ABBY R Name: BERNSTEIN, ABBY R Name:

995 SOUTH OCEAN BOULEVARD 400 SOUTH OCEAN BOULEVARD #11 Address: Address:

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: BOCA RATON, FL 33432

Title: () Delete Title: (X) Change () Addition

HORWIN, MARJORIE Name: MOSKOWITZ, HERMAN Name: Address: 3850 HOLLYWOOD BLVD., SUITE 204 Address: 2401 NW BOCA RATON BLVD City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the 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: D.BERNSTEIN Ρ 02/12/2007