

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06819

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE LURIA FAMILY FOUNDATION, INC.

Current Principal Place of Business:

7744 FISHER ISLAND DR.
FISHER ISLAND, FL 33109 US

New Principal Place of Business:

Current Mailing Address:

7774 FISHER ISLAND DR.
FISHER ISLAND, FL 33109 US

New Mailing Address:

7744 FISHER ISLAND DR.
FISHER ISLAND, FL 33109 US

FEI Number: 59-2477088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LURIA, LEONARD
7774 FISHER ISLAND DR.
FISHER ISLAND, FL 33109 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: DPT () Delete
Name: LURIA, LEONARD
Address: 7774 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL

Title: DVS () Delete
Name: LURIA, GLORIA
Address: 7774 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL

Title: D () Delete
Name: LURIA, PETER
Address: 1800 WEST 23 ST.
City-St-Zip: MIAMI BEACH, FL

Title: D () Delete
Name: LURIA, HENRY
Address: 4064 NEVIS STREET.
City-St-Zip: BOULDER, CO 80301

Title: D () Delete
Name: LURIA-COHEN, NANCY
Address: 1415 N VIEW DR SUNSET ISLAND #1
City-St-Zip: MIAMI BCH, FL 33140

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:

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: LEONARD LURIA

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

Date