

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010620

FILED
Feb 22, 2009
Secretary of State

Entity Name: RA MORRIS FAMILY FOUNDATION CORPORATION

Current Principal Place of Business:

6039 COLLINS AVENUE, #1429
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

6039 COLLINS AVENUE, #1429
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 26-1624430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORRIS, RONNIE DR
6039 COLLINS AVENUE, #1429
MIAMI BEACH, FL 33140 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: P, T () Delete
Name: MORRIS, RONNIE
Address: 6039 COLLINS AVENUE, #1429
City-St-Zip: MIAMI BEACH, FL 33140

Title: S () Delete
Name: KAMINETSKY, BERNARD
Address: 7991 TENNYSON COURT
City-St-Zip: BOCA RATON, FL 33433

Title: VP () Delete
Name: KASZOVITZ, SAUL
Address: 388 MAITLAND AVENUE
City-St-Zip: TEANECK, NJ 07666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORRIS, RONNIE
Address: 6039 COLLINS AVENUE, #1429
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: VPT (X) Change () Addition
Name: KASZOVITZ, SAUL
Address: 388 MAITLAND AVENUE
City-St-Zip: TEANECK, NJ 07666

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: RONNIE MORRIS

P

02/22/2009

Electronic Signature of Signing Officer or Director

Date