

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13623

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: WILLIAM ROSENBERG FAMILY FOUNDATION, INC.

## Current Principal Place of Business:

1375 GATEWAY BLVD.  
C/O JASON CARNEY  
BOYNTON BEACH, FL 33426 US

## New Principal Place of Business:

## Current Mailing Address:

1286 IMPERIA DRIVE  
HENDERSON, NV 89052 US

## New Mailing Address:

1375 GATEWAY BLVD.  
C/O ANN M ROSENBERG  
BOYNTON BEACH, FL 33426 US

FEI Number: 59-2675613

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARNEY, JASON  
1375 GATEWAY BLVD.  
BOYNTON BEACH, FL 33426 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: TS ( ) Delete  
Name: RYAN, CAROLYN  
Address: 1286 IMPERIA DRIVE  
City-St-Zip: HENDERSON, NV 89052

Title: DT ( ) Delete  
Name: ROSENBERG, DONALD  
Address: 265 NAHANTON STREET  
City-St-Zip: NEWTON CENTER, MA 02459 US

Title: PDT ( ) Delete  
Name: ROSENBERG, ANN  
Address: 1286 IMPERIA DRIVE  
City-St-Zip: HENDERSON, NV 89052

Title: D ( ) Delete  
Name: SIVLERSTEIN, CAROL  
Address: 3100 S. OCEAN BLVD., 201 SOUTH  
City-St-Zip: PALM BEACH, FL 33480

Title: TT ( ) Delete  
Name: ROSENBERG, JAMES  
Address: 35 CANDLEBERRY LANE  
City-St-Zip: WESTON, MA 02193

Title: D ( ) Delete  
Name: ROSENBERG, ROBERT  
Address: 4 CHADWICK ROAD  
City-St-Zip: WESTON, MA 02493

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change ( ) Addition  
Name: RYAN, CAROLYN  
Address: 997 SHINING LIGHT STREET  
City-St-Zip: HENDERSON, NV 89052

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

Title: PD (X) Change ( ) Addition  
Name: ROSENBERG, ANN  
Address: 1286 IMPERIA DRIVE  
City-St-Zip: HENDERSON, NV 89052

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: ANN M ROSENBERG

MS

04/06/2009

Electronic Signature of Signing Officer or Director

Date