

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18246

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** THE MORTON AND BEVERLEY RECHLER FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

CO/ KATZMAN, WEINSTIEN, & COMPANY, LLP  
131 JERICHO TPKE  
JERICHO, NY 11753

**New Principal Place of Business:**

**Current Mailing Address:**

100 JERICHO QUADRANGLE  
C/O THE WE'RE GROUP SUITE 106  
JERICHO, NY 11753

**New Mailing Address:**

FEI Number: 59-2828631      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RECHLER, MORTON  
1520 PASLAY PLACE  
MANALAPAN, FL 33462      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: PD  
Name: RECHLER, MORTON MR  
Address: 1520 PASLAY PLACE  
City-St-Zip: MANALAPAN, FL 33462

Title: SD  
Name: RECHLER, BEVERLEY MRS  
Address: 1520 PASLAY PLACE  
City-St-Zip: MANALAPAN, FL 33462

Title: TD  
Name: RECHLER, BENNETT MR  
Address: 35 DEERPARK ROAD  
City-St-Zip: KINGS POINT, NY 11024

Title: D  
Name: RABINOWITZ, HANNAH  
Address: 1440 LANDS END  
City-St-Zip: MANALAPAN, FL 33462

Title: D  
Name: NEWMAN-RECHLER, YVETTA  
Address: 163 WOOLEY STREET  
City-St-Zip: SOUTHAMPTON, NY 11968

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: HAROLD RECHLER

MR

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date