

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32073

FILED
Apr 07, 2006
Secretary of State

Entity Name: THE AMERICAN COMMITTEE FOR THE BEERSHEVA FOUNDATION, INC.

Current Principal Place of Business:

4433 W. TOUHY AVE.
SUITE 500
LINCOLNWOOD, IL 60712 US

New Principal Place of Business:

4711 WEST GOLF ROAD
SUITE 1000
SKOKIE, IL 60076 US

Current Mailing Address:

4433 W. TOUHY AVE.
SUITE 500
LINCOLNWOOD, IL 60712 US

New Mailing Address:

4711 WEST GOLF ROAD
SUITE 1000
SKOKIE, IL 60076 US

FEI Number: 65-0131284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODMAN, LAWRENCE
13746 MONACO WAY
FRENCHMAN CREEK
PALM BEACH GARDENS, FL 33410 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: D () Delete
Name: SLEVIN, RONALD
Address: 30 LANCASTER ROAD
City-St-Zip: TENATLY, NJ 07670

Title: D () Delete
Name: SLEVIN, JOANNA
Address: 30 LANCASTER ROAD
City-St-Zip: TENATLY, NJ 07670

Title: D () Delete
Name: COOPERMAN, SIDNEY
Address: 9350 W. BAY HARBOR DRIVE, #4A
City-St-Zip: BAY HARBOR, FL 33154

Title: D () Delete
Name: MAISEL, MELVIN
Address: 36 BIRCHWOOD DRIVE
City-St-Zip: GREENWICH, CT 06831

Title: D () Delete
Name: KONAR, WILLIAM
Address: 110 COMMERCE STREET
City-St-Zip: ROCHESTER, NY 14023

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 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: LAWRENCE GOODMAN

MR.

04/07/2006

Electronic Signature of Signing Officer or Director

Date