## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N45161

FILED Apr 18, 2007 Secretary of State

Entity Name: WILL AND ANN EISNER FAMILY FOUNDATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
	ON GARDENS	СТ			
306 PARKLAN	D, FL 33076	US			
Current Mailing Address:			New Maili	New Mailing Address:	
1425 LANDS END RD		3250 SOU	3250 SOUTH OCEAN BLVD		
MANALAPAN, FL 33462 US			504N PALM BEA	504N PALM BEACH, FL 33480 US	
El Number:	: 65-0309613	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
KAHN, CORINNE B 1425 LANDS END RD MANALAPAN, FL 33462 US			3250 SOU	KAHN, CORINNE B 3250 SOUTH OCEAN BLVD PALM BEACH, FL 33480 US	
	named entity so e of Florida.	ubmits this statement for the pur	pose of changing i	its registered office or registered agent, or both,	
SIGNATURE: CORINNE B. KAHN				04/18/2007	
	Electroni	c Signature of Registered Agent		Date	
OFFICERS	S AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:	D ()  GROPPER, RICH 214 EMMETT PL RIDGEWOOD, N	ACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Fitle: Name: Address: City-St-Zip:	EISNER, ANN W	RDENS CT., APT. 306	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition EISNER, ANN 9419 ASTON GARDENS CT., APT. 306 PARKLAND, FL 33076	
Title:	D ()	Delete	Title:	D (X) Change ( ) Addition	
√ame: √ddress:	KAHN, CORINNE 1425 LANDS EN		Name: Address:	KAHN, CORINNE B 3250 SOUTH OCEAN BLVD #504N	
City-St-Zip:	MANALAPAN, FL		City-St-Zip:	PALM BEACH, FL 33480	
Fitle: Name: Nddress: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition GROPPER, ANDREW 155 WEST 15 THE STREET APT. 2B NEW YORK, NY 10011 US	
Fitle: Name: Address: City-St-Zip:	( ) !	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition GROPPER, CARL 214 EMMETT PLACE RIDGEWOOD, NJ 07450 US	
	( )	Delete	Title: Name:	D ( ) Change (X) Addition GROPPER, NANCY	

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: CORINNE B. KAHN D 04/18/2007