2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48280

Entity Name: THE ANNA FUND, INC.

FILED Mar 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1140 KANE CONCOURSE 4TH FL

BAY HARBOR ISLANDS, FL 33154 US

New Mailing Address: Current Mailing Address:

1140 KANE CONCOURSE 4TH FL

BAY HARBOR ISLANDS, FL 33154 US

FEI Number: 65-0356477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARASH, A JEFFREY 1140 KANE CONCOURSE 4TH FLOOR MIAMI BEACH, FL 33154 US

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:

Date

Address:

Electronic Signature of Registered Agent

2710 HACKNEY RD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

2710 HACKNEY RD

(X) Change () Addition

() Delete SORREN, IONIS, BELLA SORREN, IONIS, BELLA Name: Name: 3900 N. OCEAN DRIVE, APT. 17F Address: 3900 N. OCEAN DRIVE, APT. 17F Address: City-St-Zip: LAUDERDALE-BY-THE-SEA, FL 33308 City-St-Zip: LAUDERDALE-BY-THE-SEA, FL 33308

Title: Title: (X) Change () Addition () Delete

KASS, FRANKLIN Name: KASS, FRANKLIN Name: Address: 267 NORTH PARKVIEW AVENUE Address: 267 NORTH PARKVIEW AVENUE

City-St-Zip: COLUMBUS, OH 43209 City-St-Zip: COLUMBUS, OH 43209

Title: () Delete Title: AS/D (X) Change () Addition RABINOWITZ, HAROLD R M.D. RABINOWITZ, HAROLD R M.D. Name: Name:

Address: City-St-Zip: FT LAUDERDALE, FL 33334 US City-St-Zip: FT LAUDERDALE, FL 33334 US

() Delete (X) Change () Addition Title: Title: AT/D PERKINS, G. FREDERICK Name: Name: PERKINS, G. FREDERICK 78 GREENACRES AVENUE 78 GREENACRES AVENUE Address: Address: City-St-Zip: SCARSDALE, NY 10583 City-St-Zip: SCARSDALE, NY 10583

Title: () Delete Title: S/D (X) Change () Addition

ABRAMITIS, DONNA M ABRAMITIS, DONNA M Name: Name: 1026 NE 97TH ST. 1026 NE 97TH ST. Address: Address: City-St-Zip: MIAMI, FL 33138 US City-St-Zip: MIAMI, FL 33138 US

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: BELLA IONIS SORREN **PRES** 03/02/2009