2001 UNIFORM BUSINESS REPORT (UBR)

May 11, 2001 8:00 am Secretary of State DOCUMENT # N9500001617 1. Entity Name FOUNDATION FOR THE ADVANCEMENT OF YIDDISH STUDIE 05-11-2001 90116 003 ****61.25 Principal Place of Business Mailing Address 4000 HOLLYWOOD BLVD 4000 HOLLYWOOD BLVD 530N HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0578264 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LIEBLICH, ETHELYN 4000 HOLLYWOOD BLVD 530N HOLLYWOOD FL 33021 City Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to **\$5.00** May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. VCD TITLE Delete TITI F Change ☐ Addition JAFFE, SAMUEL Z RABBI NAME NAME STREET ADDRESS 3474 PINE HAVEN CIRCLE STREET ADDRESS CITY-ST-ZIF **BOCA RATON FL** CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME LICHTMAN, HARVEY L NAME STREET ADDRESS 4000 HOLLYWOOD BLVE, #530 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33021 -- ----CITY-ST-ZIP TITLE CCD ☐ Delete TITLE ☐ Change Addition NAME ARM, MILTON RABBI NAME STREET ADDRESS 29180 WOODCREST COURT STREET ADDRESS CITY-ST-ZIP SOUTHFIELD MI CITY-ST-ZIP CCD □ Delete TITLE ☐ Change ☐ Addition SISEL KLURMAN NAME STREET ADDRESS 4000 HOLLYWOOD BLVD 530N STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME ETHELYN, LIEBLICH NAME STREET ADDRESS 4000 HOLLYWOOD BLVD STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

954-985-2400

FILED