

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005191

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** THE MARION AND LOUIS GROSSMAN FOUNDATION, INC.

**Current Principal Place of Business:**

2717 NORTH OCEAN BOULEVARD  
TOWNHOUSE #2  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

10 BEACHSIDE DRIVE  
APT 302  
ORCHID, FL 32963

**New Mailing Address:**

**FEI Number:** 65-0630576

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: GROSSMAN, MARION J.  
Address: 2717 N OCEAN BLVD., TOWNHOUSE #2  
City-St-Zip: BOCA RATON, FL

Title: D ( ) Delete  
Name: GROSSMAN, ROBERT  
Address: 10 BEACHSIDE DRIVE APT 302  
City-St-Zip: ORCHID, FL 32963

Title: D ( ) Delete  
Name: GROSSMAN, ETHAN  
Address: 115 ENGINEERS ROAD  
City-St-Zip: HAUPPAUGE, NY 11788

**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:

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: ROBERT GROSSMAN

D

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date