

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000006042

FILED
Apr 14, 2009
Secretary of State

Entity Name: AMERICAN FRIENDS OF RELIGIOUS FREEDOM IN ISRAEL - HEMDAT - AFRF, INCORPORATED

Current Principal Place of Business:

C/O ARTHUR S OBERMAYER
239 CHESTNUT ST
WEST NEWTON, MA 02465 US

New Principal Place of Business:

Current Mailing Address:

C/O ARTHUR S OBERMAYER
239 CHESTNUT ST
WEST NEWTON, MA 02465 US

New Mailing Address:

FEI Number: 31-1475367 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ULLMAN, SAMUEL C
C/O BILZINT SUMBERG
200 BISCAYNE BLVD, STE 2500
MIAMI, FL 33131 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: DP () Delete
Name: OBERMAYER, ARTHUR S
Address: 239 CHESTNUT ST
City-St-Zip: WEST NEWTON, MA 02465

Title: D () Delete
Name: GORDIS, DAVID DR
Address: 1169 COMMONWEALTH AVE
City-St-Zip: NEWTON, MA 02465

Title: D () Delete
Name: PRESS, NEWTON
Address: 18 FORBUSH AVE
City-St-Zip: WEST NEWTON, MA 02465

Title: D () Delete
Name: WINE, SHERWIN R
Address: 2861 WEST 12TH MILE RD
City-St-Zip: FARMINGTON HILLS, MI 48334

Title: D () Delete
Name: REINHARZ, SHULA DR
Address: 66 BEAUMONT AVE
City-St-Zip: NEWTONVILLE, MA 02460

Title: D () Delete
Name: PRESS, AIDA
Address: 18 FURBISH
City-St-Zip: WALTHAM, MA 02465

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 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: ARTHUR S. OBERMAYER

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date