

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004012

FILED  
Jan 18, 2008  
Secretary of State

Entity Name: SAMUEL I. ADLER FAMILY SUPPORTING FOUNDATION, INC.

**Current Principal Place of Business:**

4200 BISCAYNE BLVD.  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

4200 BISCAYNE BLVD.  
MIAMI, FL 33137

**New Mailing Address:**

FEI Number: 65-0688643      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LANDE, STEPHEN C  
4200 BISCAYNE BLVD  
MIAMI, FL 33137      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: DT ( ) Delete  
Name: SOLOMON, JACOB  
Address: 4200 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: DS ( ) Delete  
Name: LANDE, STEPHEN C  
Address: 4200 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete  
Name: PODHURST, AARON  
Address: 25 WEST FLAGLER STREET, SUITE 800  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: OREN, NEDRA  
Address: 3526 BAYSHORE VILLAGE DRIVE  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: MILLER, LEONARD  
Address: 4200 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: SO ( ) Delete  
Name: ADLER, BERNYCE  
Address: 4200 BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33137

**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:

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: STEPHEN C. LANDE

DS

01/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date