2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# N97000007069

Entity Name: J. IRA AND NICKI HARRIS FOUNDATION, INC.

Current Principal Place of Business:

220 SUNRISE AVENUE
STE 210
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

C/O BCRS ASSOCIATES
100 WALL STREET, 11TH FLOOR
NEW YORK, NY 10005

New Mailing Address:

FEI Number: 65-0805468 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, J. IRA
220 SUNRISE AVENUE, SUITE 210
PALM BEACH, FL 33480 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:	HARRIS, J IRA	
Address:	220 SUNRISE AVENUE SUITE 210	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	DV	( ) Delete
Name:	HARRIS, NICKI	
Address:	220 SUNRISE AVENUE SUITE 210	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	( ) Delete
Name:	MOORE, DAVID	
Address:	220 SUNRISE AVENUE SUITE 210	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	DS	( ) Delete
Name:	HOCHBERG, JACQUELINE H	
Address:	220 SUNRISE AVENUE, SUITE 21-	
City-St-Zip:	PALM BEACH, FL 33460	
Title:	DT	( ) Delete
Name:	HARRIS, JONATHAN	
Address:	220 SUNRISE AVENUE, SUITE 210	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	(X) Delete
Name:	TISCH, DANIEL R	
Address:	220 SUNRISE AVENUE SUITE 210	
City-St-Zip:	PALM BEACH, FL 33480	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	DPS	(X) Change ( ) Addition
Name:	HOCHBERG, JACQUELINE H	
Address:	220 SUNRISE AVENUE SUITE 210	
City-St-Zip:	PALM BEACH, FL 33480	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	TISCH, DANIEL R	
Address:	220 SUNRISE AVENUE SUITE 210	
City-St-Zip:	PALM BEACH, FL 33480	
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: JACQUELINE HOCHBERG DPS 02/12/2009

Electronic Signature of Signing Officer or Director — Date