

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000841

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: DANIEL J. GOLDMAN FOUNDATION, INC.

**Current Principal Place of Business:**

1123 71 STREET  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

1123 71 STREET  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 65-0813745

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEWIN, JONATHAN  
110 SOUTH SHORE DRIVE  
SUITE #5F  
MIAMI BEACH, FL 331413981 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: LEWIN, PEARL G  
Address: 4231 N WALNUT AVE  
City-St-Zip: ARLINGTON HEIGHTS, IL 60004

Title: D ( ) Delete  
Name: LEWIN, SEYMOUR Z  
Address: 4231 N WALNUT AVE  
City-St-Zip: ARLINGTON HEIGHTS, IL 60004

Title: CDP ( ) Delete  
Name: LEWIN, JONATHAN  
Address: 110 S SHORE DRIVE, #5F  
City-St-Zip: MIAMI BEACH, FL 331413981

**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: JONATHAN LEWIN

CDP

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date