

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002994

FILED
Jan 19, 2007
Secretary of State

Entity Name: JOSEPH & FRIEDA ROSS FOUNDATION, INC.

Current Principal Place of Business:

PO BOX 440606
MIAMI, FL 33144

New Principal Place of Business:

8520 SW 12 STREET
MIAMI, FL 33144

Current Mailing Address:

C/O PETER HORNIK
1 SE 3RD AVENUE 10TH FLOOR
MIAMI, FL 33131

New Mailing Address:

C/O PETER HORNIK
P O BOX 440606
MIAMI, FL 33144

FEI Number: 65-0919356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLINGER, SCOTT R
8180 NW 36 STREET SUITE 100
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

WILLINGER, SCOTT R
6625 MIAMI LAKES DRIVE
SUITE 217
MIAMI LAKES, FL 33014 US

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:

01/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HORNIK, PETER
Address: 8520 SW 12 STREET
City-St-Zip: MIAMI, FL 33144

Title: D () Delete
Name: HORNIK, STEVEN
Address: 13627 SUNSHOWERS CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: HORNIK, TODD
Address: PO BOX 5522
City-St-Zip: CARMEL, CA 93921

Title: D () Delete
Name: SAX, WILLIAM
Address: 230 OLD KELLER FARM ROAD
City-St-Zip: BOONE, NC 28607

Title: D () Delete
Name: PARRITZ, ROBIN
Address: 2242 FIELDSTONE DRIVE
City-St-Zip: SAINT PAUL, MN 55120

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: D (X) Change () Addition
Name: PARRITZ, ROBIN
Address: 2242 FIELDSTONE DRIVE
City-St-Zip: MENDOTA HEIGHTS, MN 55120

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER F HORNIK

PRES

01/19/2007

Electronic Signature of Signing Officer or Director

Date