

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003125

FILED  
Sep 12, 2007  
Secretary of State

Entity Name: THE VERA AND IMRE HECHT FOUNDATION, INC.

**Current Principal Place of Business:**

55 CENTRAL PARK W  
NEW YORK, NY 10023

**New Principal Place of Business:**

**Current Mailing Address:**

352 HAMILTON ST  
ALBANY, NY 12210

**New Mailing Address:**

55 CENTRAL PARK W  
NEW YORK, NY 10023

FEI Number: 31-1652204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BAND, GREGORY S ESQ.  
1680 FRUITVILLE ROAD  
102  
SARASOTA, FL 34237 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: DPT      ( ) Delete  
Name: HECHT, IMRE H  
Address: 55 CENTRAL PARK W  
City-St-Zip: NEW YORK, NY 10023

Title: DVS      ( ) Delete  
Name: HECHT, VERA  
Address: 55 CENTRAL PARK W  
City-St-Zip: NEW YORK, NY 10023

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV      (X) Change ( ) Addition  
Name: HECHT, VERA  
Address: 55 CENTRAL PARK W  
City-St-Zip: NEW YORK, NY 10023

Title: D      ( ) Change (X) Addition  
Name: WDOWIAK JAZOWNIK, IZABELA  
Address: 200 RIVERSIDE BLVD APT 7D  
City-St-Zip: NEW YORK, NY 10069

Title: DS      ( ) Change (X) Addition  
Name: FOX, IRA  
Address: 1407 BROADWAY  
City-St-Zip: NEW YORK, NY 10018

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: WDOWIAK JAZOWNIK IZABELA

D

09/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date