

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003216

FILED  
Feb 13, 2007  
Secretary of State

Entity Name: ISABEL AND JOSEPH H. DAVIDSON FOUNDATION, INC.

**Current Principal Place of Business:**

C/O SULZBERGER & SULZBERGER  
1090 KANE CONCOURSE, STE. 201  
BAY HARBOR ISLAND, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

C/O GERSON & PRESTON  
666 SEVENTY-FIRST STREET  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 65-0920970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SULZBERGER, ERIC W  
1090 KANE CONCOURSE  
BAY HARBOR ISLAND, FL 33154 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: PSD ( ) Delete  
Name: DAVIDSON, JOSEPH H  
Address: 1090 KANE CONCOURSE, STE 201  
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: VPTD ( ) Delete  
Name: DAVIDSON, ISABEL  
Address: 1090 KANE CONCOURSE, STE 201  
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: D (X) Delete  
Name: MULTACK, JOELLEN  
Address: 5500 COLLINS AVE #1702  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete  
Name: RUSKIN, CANDACE  
Address: 5500 COLLINS AVE #1702  
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: PSD (X) Change ( ) Addition  
Name: DAVIDSON, JOSEPH H  
Address: 1090 KANE CONCOURSE, STE 201  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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 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: JOSEPH H DAVIDSON

PSD

02/13/2007

Electronic Signature of Signing Officer or Director

Date