

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007301

FILED
Jan 13, 2009
Secretary of State

Entity Name: LEFTON FAMILY FOUNDATION, INC.

Current Principal Place of Business:

3250 MARY STREET
MIAMI, FL 33133

New Principal Place of Business:

3250 MARY STREET
SUITE 500
MIAMI, FL 33133

Current Mailing Address:

3250 MARY STREET
MIAMI, FL 33133

New Mailing Address:

3250 MARY STREET
SUITE 500
MIAMI, FL 33133

FEI Number: 65-0976183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFTON, DONALD E
3250 MARY STREET
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

LEFTON, DONALD E
3250 MARY STREET
SUITE 500
MIAMI, FL 33133 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:

01/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEFTON, DONALD E
Address: 3250 MARY STREET
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: LEFTON, JUDITH
Address: 3250 MARY STREET
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: FISHER, ROBYN
Address: 3250 MARY STREET
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: TABATCHNICK, LISA M
Address: 3250 MARY STREET
City-St-Zip: MIAMI, FL 33133

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:

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: DONALD E. LEFTON

D

01/13/2009

Electronic Signature of Signing Officer or Director

Date