2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005
Secretary of State

DOCUMENT# P08113

Entity Name: VOLUNTEERS FOR ISRAEL, INC.

Current Principal Place of Business:

330 W. 42ND STREET
STE 1618
NEW YORK, NY 10036

New Principal Place of Business:

Current Mailing Address:

330 W. 42ND STREET
STE 1618
NEW YORK, NY 10036

New Mailing Address:

FEI Number: 13-3143219 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KIRSHNER, BARRIE
318 CLEARBROOK CIRCLE
105
VENICE CIRCLE, FL 34292 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:	VD	( ) Delete
Name:	PITT, HAMILTON	
Address:	6708 FOREST PRESERVE	
City-St-Zip:	HARWOOD HIGHTS, IL 60706	
Title:	VD	( ) Delete
Name:	FELDMAN, LARRY	
Address:	3208 MIDFIELD RD	
City-St-Zip:	BALTIMORE, MD 21208	
Title:	VD	( ) Delete
Name:	STEIN, CAROL	
Address:	1650 LIMERICK LANE	
City-St-Zip:	DRESHER, PA 19025	
Title:	SD	( ) Delete
Name:	COLE, DEBRA	
Address:	4250 W. LK SAMM PKWY, NE	
City-St-Zip:	REDMOND, WA 98052	
Title:	TD	( ) Delete
Name:	STEIN, BARRY	
Address:	1650 LIMERICK LANE	
City-St-Zip:	DRESHER, PA 19025	
Title:	PD	( ) Delete
Name:	HERZ, JOSEF	
Address:	13705 SE 144TH STREET	
City-St-Zip:	RENTON, WA 98059	

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:	( ) 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 Section 119.07(3)(i), 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: BARRY F. STEIN TREA 01/10/2005

Electronic Signature of Signing Officer or Director — Date