

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P24703

1. Entity Name

ANTI-DEFAMATION LEAGUE OF B'NAI B'RITH, INCORPOR

Principal Place of Business

2 SOUTH BISCAYNE BLVD.
STE. 2650
MIAMI FL 33131-1802
US

Mailing Address

2 SOUTH BISCAYNE BLVD
STE 2650
MIAMI FL 33131-1802
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-1818723

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TEITELBAUM, ARTHUR N
2 SOUTH BISCAYNE BLVD
STE. 2650
MIAMI FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE C
NAME ~~BERKOWITZ, HOWARD P~~
STREET ADDRESS 823 UNITED NATIONS PLAZA
CITY-ST-ZIP NEW YORK NY 10017 ☐ Delete

TITLE C
NAME Glen Tobias ☒ Change ☐ Addition
STREET ADDRESS 823 United Nations Plaza
CITY-ST-ZIP New York, NY 10017

TITLE S
NAME BALSER, BARBARA B
STREET ADDRESS 3490 PIEDMONT ROAD, NE, SUITE 1300
CITY-ST-ZIP ATLANTA GA 30305 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME NAFTALY, ROBERT
STREET ADDRESS 600 EAST LAFAYETTE
CITY-ST-ZIP DETROIT MI ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME FOXMAN, ABRAHAM H
STREET ADDRESS 823 UNITED NATIONS PLAZA
CITY-ST-ZIP NEW YORK NY ☐ Delete

TITLE MD
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE D
NAME WILLNER, PETER T
STREET ADDRESS 823 UNITED NATIONS PLAZA
CITY-ST-ZIP NEW YORK NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME FREEDMAN, RONALD
STREET ADDRESS 823 UNITED NATIONS BANK
CITY-ST-ZIP NEW YORK NY 10017 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/01

412 885-7843

CR2E037 (10/00)



DO NOT WRITE IN THIS SPACE