

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 18, 2004 8:00 am
Secretary of State

06-18-2004 90002 033 ****61.25

DOCUMENT # P25280

1. Entity Name

AMERICAN FRIENDS OF THE HEBREW UNIVERSITY,
INC.



Principal Place of Business

11 EAST 69TH STREET
NEW YORK NY 10021

Mailing Address

11 EAST 69TH STREET
NEW YORK NY 10021

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

13-1568923

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

~~BLOOM, ANNE~~ *Beth McCoy*
7280 W PALMETTO PARK RD
STE 202
BOCA RATON FL 33433

Name *Beth McCoy*

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/19/04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Delete
NAME KATZ, FRAN
STREET ADDRESS 1010 FIFTH AVE #5B
CITY-ST-ZIP NEW YORK NY 10028

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

TITLE TD ☐ Delete
NAME KURTZ, MICHAEL S
STREET ADDRESS 354 N AVENUE EAST
CITY-ST-ZIP CRANFORD NJ

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

TITLE VP ☐ Delete
NAME GARTENBERG, PHIL
STREET ADDRESS 11 EAST 69TH STREET
CITY-ST-ZIP NEW YORK NY

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

TITLE PD ☐ Delete
NAME SORKIN, IRA L
STREET ADDRESS 551 FIFTH AVE
CITY-ST-ZIP NEW YORK NY 10176

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

TITLE COBD ☐ Delete
NAME SECHS, KEITH C
STREET ADDRESS 200 GIBRACTARD
CITY-ST-ZIP HARSHAW PA

TITLE ☐ Change ☐ Addition
NAME *Sachs, Keith L*
STREET ADDRESS *200 Gibraltar Rd*
CITY-ST-ZIP *Horsham, PA*

TITLE *EUP* ☐ Delete
NAME *P.*
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME *Peter Williams*
STREET ADDRESS *11 East 69th St*
CITY-ST-ZIP *New York, NY 10021*

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:

Philip Gartenberg

Philip Gartenberg

4/30/04

212 472-9800