

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**  
**AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)**

**NONPROFIT CORPORATION . ANNUAL REPORT 1996**



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P30647 (2)**  
 1. Corporation Name  
**NEW ISRAEL FUND, INC.**



Principal Place of Business  
**1625 K STREET NW #500 WASHINGTON DC 20006**

Mailing Address  
**1625 K STREET NW #500 WASHINGTON DC 20006**

3. Date Incorporated or Qualified **06/23/1990** 3a. Date of Last Report **05/16/1995**

4. FEI Number **94-2607722** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.03? Florida Statutes  Yes  No

2. Principal Place of Business  
 21 Suite, Apt. #, etc.  
 22 City & State  
 23 Zip  
 24 Country

2a. Mailing Address  
 26 Suite, Apt. #, etc.  
 27 City & State  
 28 Zip  
 29 Country

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>STEIN, MARY ANN</b>	
STREET ADDRESS	<b>35 WISCONSIN CIRCLE</b>	
CITY - ST - ZIP	<b>CHEVY CHASE MD</b>	
TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>TEITELBAUM, HERBERT</b>	
STREET ADDRESS	<b>3020 PALISADE AVE.</b>	
CITY - ST - ZIP	<b>RIVERDALE NY 10463</b>	
TITLE	<b>S</b>	<input type="checkbox"/> DELETE
NAME	<b>SOLARZ, NINA</b>	
STREET ADDRESS	<b>1120 BELLVIEW RD</b>	
CITY - ST - ZIP	<b>MCCLEAN VA</b>	
TITLE	<b>F</b>	<input type="checkbox"/> DELETE
NAME	<b>FISHER, FRANKLIN</b>	
STREET ADDRESS	<b>130 MT AUBURN ST #508</b>	
CITY - ST - ZIP	<b>CAMBRIDGE MA</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>BAR-ON, MORDECHAI</b>	
STREET ADDRESS	<b>7 MASRIK ST, JERUSALEM</b>	
CITY - ST - ZIP	<b>ISRAEL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>ROSENBERG, NORMAN</b>	
STREET ADDRESS	<b>3101 19TH STREET</b>	
CITY - ST - ZIP	<b>WASHINGTON DC</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

*See attached list*

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *Norman S. Rosenberg* Date: *8/6/96* Daytime Phone #: *202-223-3333*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**NORMAN S. ROSENBERG - EXEC. DIR.** 0018470

CR2E037 (3/96)

NEW ISRAEL FUND BOARD OF DIRECTORS

David Arnow  
c/o New Israel Fund  
Washington, DC

Mordechai Bar-On, Chair in Israel  
c/o New Israel Fund  
Washington, DC

Maggie Bar-Tura  
c/o New Israel Fund  
Washington, DC

Shimon Benninga  
c/o New Israel Fund  
Washington, DC

Naomi Bentsur  
c/o New Israel Fund  
Washington, DC

Helen Bernstein  
c/o New Israel Fund  
Washington, DC

Elisa Spungen Bildner  
c/o New Israel Fund  
Washington, DC

Barbara Dobkin  
c/o New Israel Fund  
Washington, DC

Barbara Epstein  
c/o New Israel Fund  
Washington, DC

Nanette Falkenberg  
c/o New Israel Fund  
Washington, DC

NEW ISRAEL FUND  
1625 K. STREET, NW  
SUITE 500  
WASHINGTON, DC 20006  
(202) 223-3333

SCHEDULE  
(Continued)

Ruben Kraiem  
c/o New Israel Fund  
Washington, DC

Theodore R. Mann  
c/o New Israel Fund  
Washington, DC

Mohammad Massarwa  
c/o New Israel Fund  
Washington, DC

J. Rolando Matalon  
c/o New Israel Fund  
Washington, DC

Robert Mnookin  
c/o New Israel Fund  
Washington, DC

Arthur S. Obermayer  
c/o New Israel Fund  
Washington, DC

Bonnie Orlin  
c/o New Israel Fund  
Washington, DC

Kathleen Peratis  
c/o New Israel Fund  
Washington, DC

Yoram Peri, Vice President in Israel  
c/o New Israel Fund  
Washington, DC

Norman S. Rosenberg  
c/o New Israel Fund  
Washington, DC

Bettylu K. Saltzman, Vice President in North America  
c/o New Israel Fund  
Washington, DC