

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P38156</b>	
1. Entity Name NATIONAL COMMITTEE FOR LABOR ISRAEL - ISRAEL HISTADRUT CAMPAIGN, INC.	



Principal Place of Business 275 7TH AVE 15TH FL NEW YORK, NY 10001 US	Mailing Address 275 7TH AVE 15 FL NEW YORK, NY 10001 US
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03162006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 13-1662100	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2006**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P MAZUR, JAY C/O 1710 BROADWAY NEW YORK, NY
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D GOODMAN, JERRY 275 7TH AVE NEW YORK, NY
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST STAMLER, ANN 275 7TH AVE NEW YORK, NY
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BAHR, MORTON 501 3RD STREET, N.W. WASHINGTON, DC
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

000000480993  
04/11/06-80015-002 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Ann Stampler Ann Stampler 3/20/06 212-647-0300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #