

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S92214

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: KATZ FAMILY CORP.

**Current Principal Place of Business:**

2255 GLADES ROAD  
SUITE 240W  
BOCA RATON, FL 33434 US

**New Principal Place of Business:**

**Current Mailing Address:**

21218 ST. ANDREWS BLVD.  
#404  
BOCA RATON, FL 33433 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KATZ, THOMAS O SEC  
2255 GLADES ROAD  
SUITE 240W  
BOCA RATON, FL 33431 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KATZ, DANIEL W PRES  
Address: 12914 STONEBROOK DRIVE  
City-St-Zip: DAVIE, FL 33330

Title: VP D ( ) Delete  
Name: KATZ, ELEANOR M VP  
Address: 5633 LIVE OAK TERRACE  
City-St-Zip: HOLLYWOOD, FL 333126378

Title: S D ( ) Delete  
Name: KATZ, THOMAS O SEC.  
Address: 8765 HORSESHOE LANE  
City-St-Zip: BOCA RATON, FL 33496

Title: VP ( ) Delete  
Name: KATZ, WALTER M VP  
Address: 714 NW 101ST TERRACE  
City-St-Zip: PLANTATION, FL 33324

**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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS O. KATZ

S D

01/14/2009

Electronic Signature of Signing Officer or Director

Date