

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000000457

**Entity Name:** KATZ FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

614 W BROWN DEER RD STE 300  
BAYSIDE, WI 53217

**Current Mailing Address:**

614 W BROWN DEER RD STE 300  
BAYSIDE, WI 53217

**FEI Number:** 61-1888247

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:** CANDICE PIGNATARO

04/20/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name KATZ, DANIEL J  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title DIRECTOR  
Name KATZ, CAROLINE R  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title DIRECTOR  
Name GONTOWNIK, LILLY  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title DIRECTOR  
Name HIRTH, SARAH  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title DIRECTOR  
Name GONTOWNIK, EZRA  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title DIRECTOR  
Name KATZ, AARON  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title DIRECTOR  
Name KATZ, PEARL  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title DIRECTOR  
Name KATZ, JACOB  
Address 614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

**Continues on page 2**

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DANIEL J. KATZ

**PRESIDENT &  
TREASURER**

04/20/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           KATZ, HANNAH  
Address        614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title           VICE PRESIDENT & SECRETARY  
Name           KATZ, CAROLINE R  
Address        614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217

Title           PRESIDENT & TREASURER  
Name           KATZ, DANIEL J  
Address        614 W BROWN DEER RD STE 300  
City-State-Zip: BAYSIDE WI 53217