

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005060

Entity Name: AMERICAN FRIENDS OF MAGEN DAVID ADOM, INC.**Current Principal Place of Business:**352 SEVENTH AVENUE
SUITE 400
NEW YORK, NY 10001**Current Mailing Address:**352 SEVENTH AVENUE
SUITE 400
NEW YORK, NY 10001**FEI Number:** 13-1790719**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TAMARA, KARU
3300 PGA BOULEVARD
SUITE 970
PALM BEACH GARDENS, FL 33410 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:** TAMARA KARU

02/22/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name FRANKEL, DAVID
Address 352 SEVENTH AVENUE, SUITE 400
City-State-Zip: NEW YORK NY 10001

Title VC
Name DOBIN, DAN
Address 352 SEVENTH AVENUE, SUITE 400
City-State-Zip: NEW YORK NY 10001

Title CH
Name LEBOW, MARK
Address 352 SEVENTH AVENUE, SUITE 400
City-State-Zip: NEW YORK NY 10001

Title VC
Name KOPMAN, FRAEDA
Address 352 SEVENTH AVENUE, SUITE 400
City-State-Zip: NEW YORK NY 10001

Title SE, SECRETARY
Name BLAINE-COHEN, PAULA
Address 352 SEVENTH AVENUE, SUITE 400
City-State-Zip: NEW YORK NY 10001

Title VC
Name TRIMPOL, GERSHON
Address 352 SEVENTH AVENUE, SUITE 400
City-State-Zip: NEW YORK NY 10001

Title CFO
Name CULANG, JAY
Address 352 SEVENTH AVENUE
400
City-State-Zip: NEW YORK NY 10001

Title TREASURER
Name FRIED CALCATERRA, DONNA
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

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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: JAY CULANG

CFO

02/22/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GOLDMAN, JACQUELINE
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name COHEN, MARTIN
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name FELDMAN, BARRY
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name GOLDMAN, MICHAEL
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name FLEISCHER, DAVID
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name KAY, BARBARA
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name LESSER, ANN
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name EPSTEIN, ANNETTA WELLER
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name BRIEF, SEYMOUR
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name EPSTEIN, LEONARD
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name LEHRER, GABY FERMAN
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name FOX, NEIL
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name HANDLESMAN, LES
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name LEEDS, DINA
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name SCHWARZWALDER, DANIEL
Address 352 SEVENTH AVENUE
SUITE 400
City-State-Zip: NEW YORK NY 10001