2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2009
Secretary of State

DOCUMENT# N29836

Entity Name: CELIA WACHS BERMAN FOUNDATION, INC.

Current Principal Place of Business:

9 UNION AVE.
BALA CYNWYD, PA 19004

New Principal Place of Business:

Current Mailing Address:

9 UNION AVE.
BALA CYNWYD, PA 19004

New Mailing Address:

FEI Number: 65-0112893 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OSBORNE, HANKINS, MCLAUREN & REDGRAVE
998 S. FEDERAL HWY., 2ND FLOOR
DRAWER 40
BOCA RATON, FL 334219740 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

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: BERMAN, MORTON J.
Address: 4068 BOCAIRE BLVD.
City-St-Zip: BOCA RATON, FL

Title: D ( ) Delete
Name: BERMAN, ROBERT A.
Address: 4 HANSEN COURT
City-St-Zip: NARBERTH, PA

Title: D ( ) Delete
Name: BERMAN, PHILIP A.
Address: 213 CRYSTAL CT
City-St-Zip: BLUE BELL, PA

Title: D ( ) Delete
Name: MILSTEIN, JANIS
Address: 710 PERIWINKLE LANE
City-St-Zip: WYNNEWOOD, PA

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

SIGNATURE: ROBERT BERMAN DIR 03/15/2009

Electronic Signature of Signing Officer or Director Date