

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000005553

**Entity Name:** IAN MADOVER AND ARIELLE TEPPER MADOVER FAMILY FOUNDATION, INC.

**FILED**  
**Jan 07, 2016**  
**Secretary of State**  
**CC5858930032**

**Current Principal Place of Business:**

JANOVER LLC  
100 QUENTIN ROOSEVELT BLVD SUITE 516  
GARDEN CITY, NY 11530

**Current Mailing Address:**

JANOVER LLC  
100 QUENTIN ROOSEVELT BLVD SUITE 516  
GARDEN CITY, NY 11530

**FEI Number:** 65-0454051

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PDT  
Name TEPPER MADOVER, ARIELLE  
Address 1501 BROADWAY, STE 1301  
City-State-Zip: NEW YORK NY 10036

Title VPSD  
Name MANDOVER, IAN  
Address 1501 BROADWAY, STE 1301  
City-State-Zip: NEW YORK NY 10036

Title D  
Name WASSER, MARTIN B  
Address C/O PHILLIP NIZER LLP, 666 FIFTH AVE.  
City-State-Zip: NEW YORK NY 10103

*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:** ARIELLE TEPPER MADOVER

**PRESIDENT**

**01/07/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date