2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# 706837

Entity Name: SOUTH FLORIDA SCIENCE MUSEUM, INC.

Current Principal Place of Business:

4801 DREHER TRAIL NORTH
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

4801 DREHER TRAIL NORTH
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 59-0915177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, RHYS
16129 BRISTOL POINTE DRIVE
DELRAY BEACH, FL 33446 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: CDT ( ) Delete
Name: WILLIAMS, RHYS
Address: 16129 BRISTOL POINTE DRIVE
City-St-Zip: DELRAY BEACH, FL 33446

Title: ST ( ) Delete
Name: KIME, JOHN
Address: 12832 U.S. HWY #1
City-St-Zip: JUNO BEACH, FL 33408

Title: TD ( ) Delete
Name: FOUNTAIN, DANIEL
Address: 7200 WEST LAKE DRIVE
City-St-Zip: W PALM BEACH, FL 33406

Title: VT ( ) Delete
Name: LORENTZEN, MATTHEW B
Address: 250 SANFORD AVE
City-St-Zip: PALM BEACH, FL 33480

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: MARY B SELLERS CEO 04/29/2009

Electronic Signature of Signing Officer or Director — Date