2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# N03000011012

Entity Name: THE ROBERT MUIR FAMILY FOUNDATION, INC.

Current Principal Place of Business:

850 NE 5 AVE
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

850 NE 5 AVE
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 20-0531069 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PILOTTE, FRANK T
340 ROYAL PALM WAY STE 100
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

PILOTTE, FRANK T
11300 US HIGHWAY 1
SUITE 401
PALM BEACH GARDENS, FL 33408 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: FRANK T PILOTTE 01/06/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MUIR, ROBERT
Address: 850 NE 5 AVE
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete
Name: MUIR, ROBIN
Address: 850 NE 5 AVE
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete
Name: PILOTTE, FRANK
Address: 340 ROYAL PALM WAY STE 100
City-St-Zip: PALM BEACH, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MUIR, ROBERT C
Address: 850 NE 5 AVE
City-St-Zip: BOCA RATON, FL 33432

Title: D (X) Change ( ) Addition
Name: MUIR, ROBIN C
Address: 850 NE 5 AVE
City-St-Zip: BOCA RATON, FL 33432

Title: D (X) Change ( ) Addition
Name: PILOTTE, FRANK T
Address: 11300 US HIGHWAY 1, SUITE 401
City-St-Zip: PALM BEACH GARDENS, FL 33408

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 C MUIR D 01/06/2009
Electronic Signature of Signing Officer or Director Date