

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006197

FILED  
Jun 23, 2009  
Secretary of State

**Entity Name:** THE MICHAEL AND LOUISA VON CLEMM FOUNDATION, INC.

**Current Principal Place of Business:**

200 S BISCAYNE BLVD #5300  
MIAMI, FL 331312339

**New Principal Place of Business:**

**Current Mailing Address:**

200 S BISCAYNE BLVD #5300  
MIAMI, FL 331312339

**New Mailing Address:**

**FEI Number:** 65-0541059      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

JOHNSON, ETHAN W  
200 S BISCAYNE BLVD  
MORGAN LEWIS & BOCKIUS, #5300  
MIAMI, FL 331312339 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: VON CLEMM, LOUISA  
Address: 58 BEDFORD GARDENS  
City-St-Zip: LONDON W8 7EM ENGLAND,

Title: TD ( ) Delete  
Name: VON CLEMM, STEFANIE C  
Address: NO 2 DRAYSON MEWS  
City-St-Zip: LONDON W8 4LY ENGLAND,

Title: SD ( ) Delete  
Name: JOHNSON, ETHAN W  
Address: 630 CAMPANA AVE  
City-St-Zip: CORAL GABLES, FL

Title: D ( ) Delete  
Name: RIGHTER, JAMES V  
Address: 58 WINTER ST  
City-St-Zip: BOSTON, MA 02108

Title: D ( ) Delete  
Name: ISELIN, CHARLOTTE  
Address: 11B SHEFFIELD TERR  
City-St-Zip: LONDON, EN W8

Title: D ( ) Delete  
Name: MCN. RIGHTER, BREWSTER A  
Address: 760 CHICKEN VALLEY RD  
City-St-Zip: LOCUST VALLEY, NY 11560

**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:

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: ETHAN W. JOHNSON

SD

06/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date