2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2012
Secretary of State

DOCUMENT# N09898

Entity Name: THE CHARLES N. AND ELEANOR KNIGHT LEIGH FOUNDATION, INC.

Current Principal Place of Business:

2555 PONCE DE LEON BLVD.
SUITE 320
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2555 PONCE DE LEON BLVD.
SUITE 320
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-2562596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADMIRE, JACK G
2555 PONCE DE LEON BLVD,
SUITE 320
CORAL GABLES, FL 33134 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: DP
Name: ADMIRE, JACK G
Address: 2555 PONCE DE LEON BLVD STE 320
City-St-Zip: CORAL GABLES, FL 33134

Title: DST
Name: SULLIVAN JR., JOHN C
Address: 2555 PONCE DE LEON BLVD STE 320
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: ADMIRE, RUTH S
Address: 2555 PONCE DE LEON BLVD STE 320
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: ADMIRE, JOHN G
Address: 2555 PONCE DE LEON BLVD STE 320
City-St-Zip: CORAL GABLES, FL 33134

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: JOHN G. ADMIRE D 01/10/2012

Electronic Signature of Signing Officer or Director — Date