

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000005750

**FILED**  
**Apr 15, 2013**  
**Secretary of State**  
**CC4237030962**

**Entity Name:** BEST BUDDIES SUPPORTING CORPORATION, INC.

**Current Principal Place of Business:**

100 SE 2ND STREET  
SUITE 2200  
MIAMI, FL 33131

**Current Mailing Address:**

100 SE 2ND STREET  
SUITE 2200  
MIAMI, FL 33131

**FEI Number:** 52-1772267

**Certificate of Status Desired:** Yes

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

SHRIVER, ANTHONY K  
SUITE 2200  
100 S.E. 2ND STREET  
MIAMI, FL 33131 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 COBP  
Name SHRIVER, ANTHONY K  
Address 100 SE 2ND STREET, SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title D  
Name BLANK, BRAD  
Address 70 FRANKLIN ST.  
City-State-Zip: BOSTON MA 02110

Title D  
Name KLINGMAN, GERARD  
Address 405 LEXINGTON AVE, 24TH FL  
City-State-Zip: NEW YORK NY 10174

*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: ANTHONY K. SHRIVER**

**CHAIRMAN**

**04/15/2013**

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

\_\_\_\_\_  
Date