2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2011
Secretary of State

DOCUMENT# F94000002761

Entity Name: CONFRERIE DE LA CHAINE DES ROTISSEURS BAILLIAGE DE PALM BEACH, INC.

Current Principal Place of Business:

TRUMP PLAZA 529 SOUTH FLAGLER DRIVE
NO 7E/F
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

TRUMP PLAZA 529 SOUTH FLAGLER DRIVE
NO 7E/F
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 22-3335680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WECHSLER, LOUIS G
TRUMP PLAZA 529 SOUTH FLAGLER DRIVE
NO 7 E/F
WEST PALM BEACH, FL 33401 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: P
Name: WECHSLER, LOUIS G
Address: TRUMP PLAZA 529 SOUTH FLAGLER DRIVE NO7E/F
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VD
Name: LEHRMAN, SUSAN M
Address: TRUMP PLAZA 529 SOUTH FLAGLER DRIVE NO7E/F
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VD
Name: BOWDEN, ELIZABETH
Address: 100 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title: D
Name: ARLETTE, GORDON
Address: 980 NORTH LAKE WAY
City-St-Zip: PALM BCH, FL 33480

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: LOUIS G. WECHSLER P 04/18/2011

Electronic Signature of Signing Officer or Director — Date