2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005401

Entity Name: THE SEXAUER FOUNDATION, INC.

FILED Jan 05, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

177 US HIGHWAY 1 11100 SW 93RD CT. ROAD #182 SUITE 10-319

TEQUESTA, FL 334692737 OCALA, FL 34481 US

Current Mailing Address: New Mailing Address:

C/O WESLEY G. CAWLEY
738 SW BALMORAL TRACE
STUART, FL 34997
11100 SW 93RD CT. ROAD
SUITE 10-319
OCALA, FL 34481 US

FEI Number: 13-6156256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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: TD

Name: ABBAMONT, THOMAS J Address: 300 HAMILTON AVENUE, #410 City-St-Zip: WHITE PLAINS, NY 10601 US

Title: VSD

 Name:
 CAWLEY, WESLEY G

 Address:
 9560 72ND STREET

 City-St-Zip:
 OCALA, FL 34481 US

Title: PD

 Name:
 HOFFMAN, EILEEN

 Address:
 405 EAST 14TH STREET, #5H

 City-St-Zip:
 NEW YORK, NY 10009 US

Title: D

Name: SILVA, GIL V

Address: 71 BROOK HILLS CIRCLE City-St-Zip: WHITE PLAINS, NY 10605 US

Title:

 Name:
 WALSH, JAMES R

 Address:
 3 GORHAM AVENUE

 City-St-Zip:
 WESTPORT, CT 06880 US

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: EILEEN HOFFMAN P 01/05/2012