2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003614

Entity Name: THE PAIRS FOUNDATION, INC.

FILED Feb 04, 2006 Secretary of State

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

1056 CREEKFORD DRIVE 1056 CREEKFORD DRIVE WESTON, FL 33326 WESTON, FL 33326 US

Current Mailing Address: New Mailing Address:

1056 CREEKFORD DRIVE1056 CREEKFORD DRIVEWESTON, FL 33326WESTON, FL 33326US

FEI Number: 52-1327867 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:

GORDON, LORI H 1056 CREEKFORD DRIVE WESTON, FL 33326 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: GORDON, LORI H Name: GORDON, LORI H Address: 1056 CREEKFORD DRIVE Address: 1056 CREEKFORD DRIVE

Address: 1056 CREEKFORD DRIVE Address: 1056 CREEKFORD DRIVE City-St-Zip: WESTON, FL 33326 US

Title: D () Delete Title: D (X) Change () Addition Name: MARKS, RICHARD Name: MARKS, RICHARD

Address: 886 PALERMO RD. Address: 886 PALERMO RD.

City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216 US

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 SIMMONS, NEAL
 Name:
 SIMMONS, NEAL

 Address:
 7410 N.W. 4TH AVE.
 Address:
 7410 N.W. 4TH AVE.

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:
 BOCA RATON, FL 33487 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LORI H. GORDON PRES 02/04/2006