

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 12, 2009
Secretary of State

DOCUMENT# N00000003614

Entity Name: THE PAIRS FOUNDATION, INC.**Current Principal Place of Business:**2771 EXECUTIVE PARK DRIVE, #1
WESTON, FL 33331 US**New Principal Place of Business:**1056 CREEKFORD DR.
WESTON, FL 33326 US**Current Mailing Address:**2771 EXECUTIVE PARK DRIVE, #1
WESTON, FL 33331 US**New Mailing Address:**1056 CREEKFORD DR.
WESTON, FL 33326 US**FEI Number:** 52-1327867**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**EISENBERG, SETH D
2771 EXECUTIVE PARK DRIVE, #1
WESTON, FL 33331 US**Name and Address of New Registered Agent:**GORDON, LORI H
1056 CREEKFORD DR.
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: LORI H. GORDON

01/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EISENBERG, SETH D
Address: 19125 STONEBROOK STREET
City-St-Zip: WESTON, FL 33332

Title: D () Delete
Name: WULTZ, YEKUTIEL
Address: 2526 JARDIN DRIVE
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: TRIPP, HOWARD
Address: 919 RED MAPLE COURT
City-St-Zip: HARTSVILLE, SC 29550

Title: D () Delete
Name: WAKIM, SAM
Address: 50777 BROOKSIDE DRIVE
City-St-Zip: GRANGER, IN 46530

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GORDON, LORI H
Address: 1056 CREEKFORD DRIVE
City-St-Zip: WESTON, FL 33326

Title: D (X) Change () Addition
Name: EISENBERG, DAVID L
Address: 100 WHITMAN RD
City-St-Zip: NEEDHAM, MS 02492

Title: D (X) Change () Addition
Name: EISENBERG, SETH D
Address: 19125 STONEBROOK STREET
City-St-Zip: WESTON, FL 33332

Title: D (X) Change () Addition
Name: TRIPP, HOWARD D
Address: 919 RED MAPLE CT.
City-St-Zip: HARTSVILLE, SC 29550

I hereby certify that the information supplied with this filing does not qualify 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

01/12/2009

Electronic Signature of Signing Officer or Director

Date