2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005
Secretary of State

DOCUMENT# N01000005098

Entity Name: FARR FAMILY FOUNDATION, INC.

Current Principal Place of Business:

C/O WHITE & CASE LLP
200 SOUTH BISCAYNE BLVD., SUITE 4900
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

C/O WHITE & CASE LLP
200 SOUTH BISCAYNE BLVD., SUITE 4900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1122896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAVOUKJIAN, MICHAEL E
C/O WHITE & CASE LLP
200 SOUTH BISCAYNE BLVD., SUITE 4900
MIAMI, FL 33131 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:	PD	( ) Delete
Name:	FARR, C. SIMS	
Address:	900 YEAMANS HALL ROAD	
City-St-Zip:	CHARLESTN, SC 39406	
Title:	VPSD	( ) Delete
Name:	FARR, MURIEL T	
Address:	900 YEAMANS HALL ROAD	
City-St-Zip:	CHARLESTN, SC 39406	
Title:	DTVP	( ) Delete
Name:	BYRNES, JOHN E III	
Address:	200 EAST 66TH STREET APT. E1104	
City-St-Zip:	NEW YORK, NY 10021	
Title:	DVP	( ) Delete
Name:	KAVOUKJIAN, MICHAEL E	
Address:	200 SOUTH BISCAYNE BLVD. SUITE 4900	
City-St-Zip:	MIAMI, FL 33131	
Title:	DVP	( ) Delete
Name:	FARR, JOHN	
Address:	419 CANTITOE STREET	
City-St-Zip:	BEDFORD HILLS, NY 10507	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL E. KAVOUKJIAN VP 04/20/2005

Electronic Signature of Signing Officer or Director — Date