2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007945

FILED May 16, 2008 Secretary of State

Entity Name: ST. MATTHEW'S CHARITABLE FOUNDATION, INC.

| Current Principal Place of Business: | | New Principal Place of Business: |
|--------------------------------------|---|---|
| 1005 W COLLEGE BLVD | | 12124 HIGH TECH AVE. |
| SUITE A | | SUITE 350 |
| NICEVILLE, FL 32578 | | ORLANDO, FL 32817 |
| Current Mailing Address: | | New Mailing Address: |
| | DLLEGE BLVD | 12124 HIGH TECH AVE. |
| SUITE A NICEVILLE | E, FL 32578 | SUITE 350 ORLANDO, FL 32817 |
| | | mber Not Applicable () Certificate of Status Desired () |
| n accordanc | ce with s. 607.193(2)(b), F.S., the corporation did not receive | the prior notice. |
| Name and | Address of Current Registered Agent: | Name and Address of New Registered Agent: |
| | ARLENE K | FOX, LISA |
| 239 WAVA | AVE E, FL 32578 US | 12124 HIGH TECH AVE SUITE 350 |
| VIOLVILLE | L, I L 32370 GO | ORLANDO, FL 32817 US |
| The above | named entity submits this statement for the purpose | of changing its registered office or registered agent, or both, |
| n the State | e of Florida. | |
| SIGNATURE: LISA FOX | | 05/16/2008 |
| | Electronic Signature of Registered Agent | Date |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |
| Title: | D () Delete | Title: () Change () Addition |
| Name: | MARVIN, JOHN D | Name: |
| Address: City-St-Zip: | 2847 HAZEL GROVE LANE OVIEDO, FL 32766 | Address: City-St-Zip: |
| T:41 | D () Delete | - () Ob () Addition |
| Γitle: √ame: | D () Delete RODGER, STEVEN C | Title: () Change () Addition Name: |
| Address: | 41 WEST PUTNAM AVENUE | Address: |
| City-St-Zip: | GREENWICH, CT 06830 | City-St-Zip: |
| Γitle: | D () Delete | Title: D (X) Change () Addition |
| Name: | THOMAS, JAMES C | Name: MOYA, TERRY C |
| Address: | 4847 WALNUT RIDGE RD | Address: 1201 AVALON DRIVE |
| City-St-Zip: | LAND O'LAKES, FL 34638 | City-St-Zip: ACTON, MA 01720 |
| Γitle: | D () Delete | Title: () Change () Addition |
| Name: | WECHSLER, JOHN I | Name: |
| Address: | 41 WEST PUTNAM AVENUE | Address: |
| City-St-Zip: | GREENWICH, CT 06830 | City-St-Zip: |
| Γitle: | D () Delete | Title: () Change () Addition |
| Name: | DANIELS, C BRYAN | Name: |
| Address: City-St-Zip: | 191 NORTH WACHER DRIVE STE 800 | Address: |
| on, orzip. | CHICAGO, IL 60606 | City-St-Zip: |
| | | |
| | | |

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: TERRY MOYA D 05/16/2008