2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002208

Entity Name: HILLEL AT FSU FOUNDATION, INC.

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Bu
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843 W. PENSACOLA STREET TALLAHASSEE, FL 32304

Current Mailing Address: New Mailing Address:

843 W. PENSACOLA STREET TALLAHASSEE, FL 32304

FEI Number: 59-6194457 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:

ANNIS, MELANIE 843 W. PENSACOLA STREET TALLAHASSEE, FL 32304 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: PPRS () Delete Title: TRES (X) Change () Addition Name: SACHER, LESLEY Name: KAUFFMAN, JAY Address: 2438 BEAUTYBERRY COURT Address: 7296 MARATHON DRIVE, #306

City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: SEMINOLE, FL 33777

Title: PRES () Delete Title: PPRS (X) Change () Ado

Title:PRES() DeleteTitle:PPRS(X) Change () AdditionName:ALDRIDGE-RUSSELL, TERRI SUEName:ALDRIDGE-RUSSELL, TERRI SUEAddress:714 RIGGINS ROADAddress:714 RIGGINS ROADCity-St-Zip:TALLAHASSEE, FL 32306City-St-Zip:TALLAHASSEE, FL 32306

Title: FIN () Delete Title: PRES (X) Change () Addition Name: LEVINE, MARILYNN Name: LEVINE, MARILYNN

Address: 321 JACARANDA DRIVE Address: 321 JACARANDA DRIVE
City-St-Zip: PLANTATION, FL 33324 City-St-Zip: PLANTATION, FL 33324

Title: DIR () Delete Title: EXDR (X) Change () Addition Name: ANNIS, MELANIE Name: ANNIS, MELANIE

Address: 8051 TENNYSON DRIVE Address: 8051 TENNYSON DRIVE
City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32309

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

 Name:
 JARON, MARTÍN
 Name:

 Address:
 8051 TENNYSON DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32309
 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: MELANIE ANNIS EXD 04/22/2008