2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attach

SIGNATURE:

Secretary of State 02-12-2007 90082 031 ****61.25 DOCUMENT # N03000005599 ROBERT G. FRIEDMAN FOUNDATION, INC. 40074044 Mailing Address Principal Place of Business 76 ISLA BAHIA DR 76 ISLA BAHIA DR FT LAUDERDALE, FL 33316 FT LAUDERDALE, FL 33316 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01162007 CR2E037 (12/06) Applied For City & State 4. FEI Number City & State 59-1726262 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent O CONNOR, DANIEL, P.J ESQ. O'CONNOR, DANIEL P.J. ESQ Street Address (P.O. Box Number is Not Acceptable) BRINKLEY, MORGAN, SOLOMON, TATUM, STANLEY ETAL BRINKLEY, MCNEREY, MORGAN, ETAL 200 E LAS OLAS BLVD STE 1900 FT LAUDERDALE, FL 33301 200 E. LAS OLAS BLVD.. STE 1900 Zip Code 33301 FORT LAUDERDALE 8. 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Change ☐ Delete TITLE TITLE FRIEDMAN, ROBERT G NAME NAME 76 ISLA BAHIA DR STREET ADDRESS STREET ADDRESS FT LAUDERDALE, FL 33316 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE FRIEDMAN, EUGENIE S STREET ADDRESS STREET ADDRESS 76 ISLA BAHIA DR CITY-ST-ZIP FT LAUDERDALE, FL 33316 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE FRIEDMAN, ELIZABETH NAME NAME STREET ADDRESS 76 ISLA BAHIA DR STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33316 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Change ☐ Addition IIILE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 fusite empowered to execute this feport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

MBQBERT G. FRIEDMAN

Daytime Phone #

FILED Feb 12, 2007 8:00 am