2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2006
Secretary of State

DOCUMENT# N04000000425

Entity Name: TYLOR FOUNDATION INC.

Current Principal Place of Business:

9880 MARINA BLVD.
1535
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

9880 MARINA BLVD.
1535
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 20-0596949 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TYLOR, SOFEA
9880 MARINA BLVD, SUITE 1531
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

TYLOR, SOFEA
9880 MARINA BLVD,
1535
BOCA RATON, FL 33428 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: _____ 07/28/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: TYLOR, SOFEA
Address: 9880 MARINA BLVD.
City-St-Zip: BOCA RATON, FL 33428

Title: VP ( ) Delete
Name: KAISER, NICOL T.
Address: 4005 ROSEMARY AVE
City-St-Zip: WEST PALM BEACH, FL

Title: TS ( ) Delete
Name: KAISER, CRISTINA
Address: 4005 S. ROSEMARY AVE
City-St-Zip: WEST PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: TYLOR, SOFEA
Address: 9880 MARINA BLVD. SUITE 1535
City-St-Zip: BOCA RATON, FL 33428

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 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: SOFEA TYLOR PRES 07/28/2006
Electronic Signature of Signing Officer or Director — Date