2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008
Secretary of State

DOCUMENT# N04000005231

Entity Name: THE HOWARD MUSOFF CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

6528 LANDINGS CT.
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

6528 LANDINGS CT.
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 80-0110907 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUSOFF, WALLACE
6528 LANDINGS CT.
BOCA RATON, FL 33496 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: MUSOFF, WALLACE
Address: 6528 LANDINGS CT.
City-St-Zip: BOCA RATON, FL 33496

Title: STD ( ) Delete
Name: MUSOFF, SANDRA
Address: 6528 LANDINGS CT.
City-St-Zip: BOCA RATON, FL 33496

Title: VD ( ) Delete
Name: MUSOFF, JAY K
Address: 15 DUNHAM RD.
City-St-Zip: SCARSDALE, NY 10583

Title: VD ( ) Delete
Name: MUSOFF, SCOTT D
Address: E CASTLE WALK
City-St-Zip: SCARSDALE, NY 10583

Title: VD ( ) Delete
Name: MUSOFF, ADAM L
Address: 104 ARBON LANE
City-St-Zip: NEW BERN, NC 28562

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: VD (X) Change ( ) Addition
Name: MUSOFF, SCOTT D
Address: 6 CASTLE WALK
City-St-Zip: SCARSDALE, NY 10583

Title: ( ) Change ( ) Addition
Name:
Address:
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: WALLACE MUSOFF PD 01/24/2008

Electronic Signature of Signing Officer or Director — Date