2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# N04000010892

Entity Name: BERNIE MARS MEMORIAL FUND INC.

Current Principal Place of Business:

C/O MITCHELL SILVEY C.P.A.
2699 STIRLING ROAD SUITE B-205
HOLLYWOOD, FL 33312

New Principal Place of Business:

Current Mailing Address:

C/O MITCHELL SILVEY C.P.A.
2699 STIRLING ROAD SUITE B-205
HOLLYWOOD, FL 33312

New Mailing Address:

FEI Number: 20-1910531 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILVEY, MITCHELL
2699 STIRLING ROAD
SUITE B-205
HOLLYWOOD, FL 33312 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: P ( ) Delete
Name: LEVY, CAL
Address: 11531 SW 10 COURT
City-St-Zip: PEMBROKE PINES, FL 33025

Title: ST ( ) Delete
Name: SILVEY, MITCHELL
Address: 2200 N 52 AVE
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MITCHELL H. SILVEY ST 01/05/2009

Electronic Signature of Signing Officer or Director — Date