2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008
Secretary of State

DOCUMENT# N04000012078

Entity Name: RE LAMIS CROWN FOUNDATION, INC.

Current Principal Place of Business:

2 NORTH BREAKERS ROW, SUITE S24
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

2 NORTH BREAKERS ROW, SUITE S24
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 20-2067790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BNR PARTNERS, LLC
20 NORTH WACKER DRIVE, SUITE 1300
CHICAGO, IL, FL 60606 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: D ( ) Delete
Name: BLOCK, ELLEN H
Address: 2 NORTH BREAKERS ROW, SUITE S24
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: BLOCK, LAURIE A
Address: 2 NORTH BREAKERS ROW, SUITE S24
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: BLOCK, MICHAEL H
Address: 2 NORTH BREAKERS ROW, SUITE S24
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: BLOCK CASDIN, SUSAN S
Address: 2 NORTH BREAKERS ROW, SUITE S24
City-St-Zip: PALM BEACH, FL 33480

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: ( ) 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: ALLEN C. BERG AGEN 03/14/2008

Electronic Signature of Signing Officer or Director — Date