2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010248

FILED Jan 04, 2012 Secretary of State

Entity Name: BONNIE AND JAMIE SCHAEFER FAMILY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

595 S FEDERAL HIGHWAY 555 S FEDERAL HIGHWAY SUITE 600 SUITE 340

BOCA RATON, FL 33432 BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

595 S FEDERAL HIGHWAY
SUITE 600
SUITE 340
BOCA RATON, FL 33432
BOCA RATON, FL 33432

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVINE, MARCIA E
595 S FEDERAL HIGHWAY
SUITE 600
BOCA RATON, FL 33432 US

LEVINE, MARCIA E
555 S FEDERAL HIGHWAY
SUITE 340
BOCA RATON, FL 33432 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: MARCIA E LEVINE 01/04/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P/D

Name: SCHAEFER, EILEEN B Address: 2070 N. OCEAN BLVD. City-St-Zip: BOCA RATON, FL 33431

Title: VPTD

Name: SCHAEFER, JAMIE
Address: 2070 N. OCEAN BLVD.
City-St-Zip: BOCA RATON, FL 33431

Title: S

Name: CORR, DIANE

Address: 601 CYPRESS POINTE DRIVE WEST City-St-Zip: PEMBROKE PINES, FL 33027

Title: [

Name: LEVINE, MARCIA E

Address: 555 SOUTH FEDERAL HWY., SUITE 340

City-St-Zip: BOCA RATON, FL 33432

I hereby 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 all other like empowered.

SIGNATURE: MARCIA E LEVINE D 01/04/2012