2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2007
Secretary of State

DOCUMENT# N06000003067

Entity Name: WISBEFOUNDATION, INC.

Current Principal Place of Business:

2040 BARCELONA TER
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

2040 BARCELONA TER
MARGATE, FL 33063

New Mailing Address:

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

TOUSSAINT, NANCY
2040 BARCELONA TER
MARGATE, FL 33063 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: TCUSSAINT, NANCY
Address: 2040 BARCELONA TER
City-St-Zip: MARGATE, FL 33063

Title: DV ( ) Delete
Name: INNOCENT, MARRIETTA
Address: 1359 SEAVIEW
City-St-Zip: MARGATE, FL 33068

Title: D ( ) Delete
Name: DUMERVIL, JUDITH
Address: 2040 BARCELONA TR
City-St-Zip: MARGATE, FL 33063

Title: S ( ) Delete
Name: PHILLIPI, JOUSELIE
Address: 7523 KIMBERLY BLVD
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: ANSELME, JENNIFER
Address: 2040 BARCELONA TR
City-St-Zip: MARGATE, FL 33063

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: NANCY TOUSSAINT MS 08/25/2007

Electronic Signature of Signing Officer or Director — Date