2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012507

Entity Name: ROTHMAN FOUNDATION, INC.

FILED Jan 22, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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C/O ROBERT ROTHMAN 201 NORTH FRANKLIN STREET STE 2880 TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

C/O ROBERT ROTHMAN 201 NORTH FRANKLIN STREET STE 2880 TAMPA, FL 33602

FEI Number: 16-1779570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE STE 3000 MIAMI, FL 33131 US

CORPORATE CREATIONS INTERNATIONAL, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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: JIM PERKINS 01/22/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

Name: ROTHMAN, ROBERT Name:

Address: 201 NORTH FRANKLIN STREET STE 2880 Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ROTHMAN, MARGARET M
 Name:

 Address:
 201 NORTH FRANKLIN STREET STE 2880
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ATWOOD, CAROLYN M
 Name:

 Address:
 201 NORTH FRANKLIN STREET STE 2880
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 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: ROBERT ROTHMAN D 01/22/2008