2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008
Secretary of State

DOCUMENT# N07000010139

Entity Name: JAMES WARD AND PATRICIA WALDMAN PRIVATE FOUNDATION INC.

Current Principal Place of Business:

225 PERUVIAN AVE., SUITE 201
PALM BCH, FL 33480

New Principal Place of Business:

Current Mailing Address:

225 PERUVIAN AVE., SUITE 201
PALM BCH, FL 33480

New Mailing Address:

FEI Number: 26-0662577 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, DEREK
2385 EXECUTIVE DR., SUITE 190
BOCA RATON, FL 33431 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:	WARD, JAMES	
Address:	225 PERUVIAN AVE., SUITE 201	
City-St-Zip:	PALM BCH, FL 33480	
Title:	D	( ) Delete
Name:	WALDMAN, PATRICIA	
Address:	225 PERUVIAN AVE., SUITE 201	
City-St-Zip:	PALM BCH, FL 33480	
Title:	D	( ) Delete
Name:	SCHWARTZ, DEREK	
Address:	2385 EXECUTIVE DR., SUITE 190	
City-St-Zip:	BOCA RATON, FL 33431	
Title:	D	( ) Delete
Name:	CAULK, BRUCE	
Address:	1966 GREENSPRING DR., SUITE 405	
City-St-Zip:	TIMONIUM, MD 21093	

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: PATRICIA WALDMAN D 01/17/2008

Electronic Signature of Signing Officer or Director — Date