2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010139

FILED Apr 01, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 225 PERUVIAN AVE., SUITE 201 PALM BCH, FL 33480 **Current Mailing Address: New Mailing Address:** 225 PERUVIAN AVE., SUITE 201 P.O. BOX 2465 PALM BCH, FL 33480 PALM BEACH, FL 33480 FEI Number: 26-0662577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHWARTZ, DEREK 2385 EXECUTIVE DR., SUITE 190 BOCA RATON, FL 33431 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WARD, JAMES Name: Name: 225 PERUVIAN AVE., SUITE 201 Address: Address: City-St-Zip: PALM BCH, FL 33480 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: WALDMAN, PATRICIA Name: WARD, PATRICIA Address: 225 PERUVIAN AVE., SUITE 201 Address: 225 PERUVIAN AVE., SUITE 201 City-St-Zip: PALM BCH, FL 33480 City-St-Zip: PALM BCH, FL 33480 Title: () Delete Title: () Change () Addition SCHWARTZ, DEREK Name: Name: 2385 EXECUTIVE DR., SUITE 190 Address: Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CAULK, BRUCE Name: 1966 GREENSPRING DR., SUITE 405 Address: Address: City-St-Zip: TIMONIUM, MD 21093 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: JAMES J. WARD III D 04/01/2009