2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007
Secretary of State

DOCUMENT# N17403

Entity Name: WILLNER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

% ERW CPA, 11555 HERON BAY BLVD.
SUITE 200
CORAL SPRINGS, FL 33076

New Principal Place of Business:

Current Mailing Address:

% ERW CPA, 11555 HERON BAY BLVD.
SUITE 200
CORAL SPRINGS, FL 33076

New Mailing Address:

FEI Number: 13-3375676 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLNER, ALBERT
% ERW CPA, 11555 HERON BAY BLVD.
SUITE 200
CORAL SPRINGS, FL 33076 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: WILLNER, ALBERT
Address: %ERW CPA, 11555 HERON BAY BL, SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D ( ) Delete
Name: WILLNER, JOSEPH
Address: %ERW CPA, 11555 HERON BAY BL, SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D ( ) Delete
Name: BLOOMGARDEN, JANE
Address: %ERW CPA, 11555 HERON BAY BL, SUITE 200
City-St-Zip: CORAL SPRINGS, FL 33076

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALBERT WILLNER PD 03/21/2007

Electronic Signature of Signing Officer or Director — Date