2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18435

FILED Apr 16, 2009 Secretary of State

Entity Name: THE LEWIS FAMILY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9500 S DADELAND BOULEVARD SUITE 603 MIAMI, FL 33156

Current Mailing Address: New Mailing Address:

PO BOX 561009 MIAMI, FL 332561009 US

FEI Number: 59-2807433 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:

LEWIS, MARY LEE LEWIS, MARY LEE 5820 SW 114TH TERRACE 9500 S DADELAND BLVD PINECREST, FL 33156 SUITE 603 MIAMI, FL 33156 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: 04/16/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete LEWIS. MARY LEE LEWIS, MARY LEE Name: Name: 5820 SW 114TH TERRACE Address: 9500 S. DADELAND BLVD. #603 Address:

PINECREST, FL 33156 City-St-Zip: City-St-Zip: MIAMI, FL 33156

Title: SVD () Delete Title: SVD (X) Change () Addition LEWIS, LEE MICHAEL Name: LEWIS, LEE M Name:

Address: 5820 SW 114TH TERRACE Address: 9500 S. DADELAND BLVD. #603

City-St-Zip: PINECREST, FL 33156 City-St-Zip: MIAMI, FL 33156

Title: TVD () Delete Title: TVD (X) Change () Addition LEWIS, JANET LEE LEWIS ROBINSON, JANET L Name: Name: 5820 SW 114TH TERRACE 9500 S DADELAND BLVD, #603 Address: Address: City-St-Zip: PINECREST, FL 33156 MIAMI, FL 33156

City-St-Zip:

Title: ASD () Delete Title: ASD (X) Change () Addition

SILVER, JEFFREY A Name: SILVER, JEFFREY A Name: 9500 S. DADELAND BLVD, STE 603 9500 S. DADELAND BLVD, STE 603 Address: Address:

City-St-Zip: MIAMI, FL 331562848 City-St-Zip: MIAMI, FL 33156

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: MARY LEE LEWIS Ρ 04/16/2009