2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# N33294

Entity Name: THE WHARTON SCHOOL CLUB OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

C/O KAIHAN KRIPPENDORFF
1900 SUNSET HARBOUR DR., #1205
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1224 NW 140 TERRACE
PEMBROKE PINES, FL 33028 US

New Mailing Address:

FEI Number: 65-0214315 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOLL, CRAIG
1224 NW 140 TERRACE
PEMBROKE PINES, FL 33028 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: TD ( ) Delete
Name: TOLL, CRAIG
Address: 1224 NE 140 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete
Name: SCHNEIROV, BARRY
Address: 2529 JARDIN DR.
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete
Name: HILL, STUART B
Address: 11400 SW 23 PLACE
City-St-Zip: DAVIE, FL 33325

Title: D ( ) Delete
Name: ZYNE, YASMINE
Address: 18316 LONG LAKE DRIVE
City-St-Zip: BOCA RATON, FL 33496

Title: PD ( ) Delete
Name: BRITTON, BILL
Address: 3040 N 34TH STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DP ( ) Change (X) Addition
Name: KRIPPENDORFF, KAIHAN
Address: 1900 SUNSET HARBOUR DRIVE #1205
City-St-Zip: MIAMI BEACH, FL 33139 US

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: CRAIG TOLL TD 01/28/2008
Electronic Signature of Signing Officer or Director — Date