2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46356

FILED Apr 20, 2005 Secretary of State

Entity Name: THE ALEXANDER W. DREYFOOS, JR. CHARITABLE FOUNDATION, INC.

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

241 BRADLEY PLACE 501 S FLAGLER DRIVE

PALM BEACH, FL 33480 US SUITE 303

WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

PO BOX 2566 501 S FLAGLER DRIVE

WEST PALM BEACH, FL 33402 US SUITE 303

WEST PALM BEACH, FL 33401 US

FEI Number: 65-0331597 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:

CHAUNCEY, HARRISON K., JR. JONES FOSTER SERVICE LLC 241 BRADLEY PLACE 505 S FLAGLER DRIVE

SUITE 200 SUITE 1100

PALM BEACH, FL 33480 US WEST PALM BEACH, FL 33401 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: DAVID BOWERS 04/20/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:TDP () DeleteTitle:TDC (X) Change () AdditionName:DREYFOOS, ALEXANDER, W.Name:DREYFOOS, ALEXANDER W JRAddress:505 S. FLAGLER DRIVE, STE. 1450Address:501 S. FLAGLER DRIVE, STE. 303City-St-Zip:WEST PALM BEACH, FLCity-St-Zip:WEST PALM BEACH, FL 33401

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

Name: CHAUNCEY, HARRISON K, ., JR Name: DREYFOOS, RENATE E

Address: 241 BRADLEY PLACE Address: 501 S. FLAGLER DRIVE, STE. 303
City-St-Zip: PALM BEACH, FL City-St-Zip: WEST PALM BEACH, FL 33401

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

 Name:
 Name:
 MURRAY, DICKRON E

 Address:
 Address:
 501 S. FLAGLER DRIVE, STE. 303

 City-St-Zip:
 City-St-Zip:
 WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DICKRON E MURRAY TDP 04/20/2005