2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007
Secretary of State

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Entity Name: SCHWARZKOPF FAMILY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

400 N. ASHLEY STREET
SUITE 3050
TAMPA, FL 33602

New Principal Place of Business:

302 KNIGHTS RUN AVENUE
SUITE 910
TAMPA, FL 33602

Current Mailing Address:

400 N. ASHLEY STREET
SUITE 3050
TAMPA, FL 33602

New Mailing Address:

302 KNIGHTS RUN AVENUE
SUITE 910
TAMPA, FL 33602

FEI Number: 59-3236578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARZKOPF, H. NORMAN GEN
400 N. ASHLEY STREET
SUITE 3050
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

SCHWARZKOPF, H. NORMAN GEN
302 KNIGHTS RUN AVENUE
SUITE 910
TAMPA, FL 33602 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: 03/14/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SCHWARZKOPF, H. NORMAN GEN
Address: 400 N. ASHLEY STREET, SUITE 3050
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete
Name: SCHWARZKOPF, BRENDA H
Address: 400 N. ASHLEY STREET, SUITE 3050
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete
Name: SCHWARZKOPF, CYNTHIA P
Address: 400 N. ASHLEY STREET, SUITE 3050
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SCHWARZKOPF, H. NORMAN GEN
Address: 302 KNIGHTS RUN AVENUE, SUITE 910
City-St-Zip: TAMPA, FL 33602

Title: D (X) Change ( ) Addition
Name: SCHWARZKOPF, BRENDA H
Address: 302 KNIGHTS RUN AVENUE, SUITE 910
City-St-Zip: TAMPA, FL 33602

Title: D (X) Change ( ) Addition
Name: SCHWARZKOPF, CYNTHIA P
Address: 302 KNIGHTS RUN AVENUE, SUITE 910
City-St-Zip: TAMPA, FL 33602

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: H. NORMAN SCHWARZKOPF D 03/14/2007
Electronic Signature of Signing Officer or Director — Date