## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000005329

FILED Feb 10, 2009 Secretary of State

Entity Name: SFC CHARITABLE FOUNDATION, INC.

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

2612 JASPER BLVD

SULLIVANS ISLAND, SC 29482 US

**Current Mailing Address: New Mailing Address:** 

200 E LAS OLAS BLVD **SUITE 1700** 

FORT LAUDERDALE, FL 33301 US

FEI Number: 65-0565248 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:

KNISKERN, DOUGLAS 200 E LAS ÓLAS BLVD **SUITE 1700** 

FORT LAUDERDALE, FL 33301 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

RENNERT, IRWIN L RENNERT, IRWIN L Name: Name: 1880 CENTURY PARK EAST - #1600 Address: 1880 CENTURY PARK EAST - #1600 Address:

City-St-Zip: LOS ANGELES, CA City-St-Zip: LOS ANGELES, CA 90067

Title: DS Title: () Delete () Change () Addition

Name: KATZ, JOEL A Name: Address: 3290 NORTHSIDE PARKWAY, SUITE 400 Address: City-St-Zip: ATLANTA, GA 30327 City-St-Zip:

Title: () Delete Title: () Change () Addition

KAUFMAN, HOWARD Name: Name: 9200 SUNSET BOULEVARD, SUITE 530 Address: Address: City-St-Zip: LOS ANGELES, FL 90069 City-St-Zip:

Title: DOA ( ) Delete Title: () Change () Addition

Name: RANGER-SMITH, JUDITH Name: Address: 2612 JASPER BLVD Address: City-St-Zip: SULLIVANS ISLAND, SC 29482 City-St-Zip:

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: IRWIN RENNERT DT 02/10/2009