2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N96000004069

Entity Name: GTH FELLOWSHIP FOUNDATION, INC.

Current Principal Place of Business:

1221 BRICKELL AVENUE
ATTN: DIR OF FINANCE
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1221 BRICKELL AVENUE
ATTN: DIR OF FINANCE
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0686251 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: D ( ) Delete
Name: SAXL, STEPHEN
Address: 200 PARK AVE., 29TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: P ( ) Delete
Name: SKOLNICK, HOLLY
Address: 1221 BRICKELL AVE., #2100
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: KORNSPAN, SUSAN
Address: 777 SOUTH FLAGLER DR., SUITE 300 EAST
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete
Name: LEHR, MICHAEL
Address: TWO COMMERCE SQ.,SUITE 2700,2001 MARKET ST
City-St-Zip: PHILIDELPHIA, PA 19103

Title: D ( ) Delete
Name: KIM, RAYMOND
Address: 2450 COLORADO AVE., SUITE 400E
City-St-Zip: SANTA MONICA, CA 90404

Title: D ( ) Delete
Name: VAN FLEET, ALLEN
Address: 1000 LOUISIANA ST., SUITE 1800
City-St-Zip: HOUSTON, TX 77002

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: ( ) Change ( ) Addition
Name:
Address:
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: HOLLY SKOLNICK P 04/30/2009

Electronic Signature of Signing Officer or Director — Date