2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N98000002522

Entity Name: THE ZIMMER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

1343 MAIN ST
STE 400
SARASOTA, FL 34236

New Principal Place of Business:

C/O FOUNDATION SOURCE
501 SILVERSIDE ROAD, SUITE 123
WILMINGTON, DE 19809

Current Mailing Address:

1343 MAIN ST
STE 400
SARASOTA, FL 34236

New Mailing Address:

C/O FOUNDATION SOURCE
501 SILVERSIDE ROAD, SUITE 123
WILMINGTON, DE 19809

FEI Number: 31-1596973 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: DP ( ) Delete
Name: ZIMMER, CHERYL L
Address: 1343 MAIN ST STE 400
City-St-Zip: SARASOTA, FL 34236

Title: DT ( ) Delete
Name: ZIMMER, JARED S
Address: 1343 MAIN STREET STE 400
City-St-Zip: SARASOTA, FL 34236

Title: DV ( ) Delete
Name: ZIMMER, ROBERT
Address: 1700 SEMINOLE DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: DS ( ) Delete
Name: ZIMMER, JORDAN L
Address: 1343 MAIN STREET STE 400
City-St-Zip: SARASOTA, FL 34236

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ZIMMER, CHERYL L
Address: 1343 MAIN ST STE 400
City-St-Zip: SARASOTA, FL 34236

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

Title: VP (X) Change ( ) Addition
Name: ZIMMER, ROBERT S
Address: 1700 SEMINOLE DRIVE
City-St-Zip: SARASOTA, FL 34239

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

Title: D ( ) Change (X) Addition
Name: ZIMMER, JOSHUA H
Address: 1343 MAIN STREET STE 400
City-St-Zip: SARASOTA, FL 34236

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: CHANA SPIELMAN ADM 04/29/2008

Electronic Signature of Signing Officer or Director — Date