I hereby 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 all other like empowered.

Ρ

SIGNATURE: CARLOS MORRISON

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business:

222 LAKEVIEW AVENUE PH 5 WEST PALM BEACH, FL 33401

DOCUMENT# N9800006444

Current Mailing Address:

222 LAKEVIEW AVE PH-5 WEST PALM BEACH, FL 33401

FEI Number: 65-0874124

Name and Address of Current Registered Agent:

KOEPPEL, JOEL P 400 SOUTH AUSTRALIAN AVE STE 300 WEST PALM BEACH, FL 33401 US

FILED Apr 23, 2013 Secretary of State CC4272648604

Certificate of Status Desired: No

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

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Officer/Director Detail :

Title	PD	Title	ST
Name	MORRISON, CARLOS S	Name	COHEN, LOUIS M
Address	222 LAKEVIEW AVE PH-5	Address	222 LAKEVIEW AVE PH-5
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	V		
Name	MORRISON, THOMAS		
Address	222 LAKEVIEW AVE PH-5		
City-State-Zip:	WEST PALM BEACH FL 33401		

04/23/2013

Date