## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#833174** 

FILED Feb 07, 2006 Secretary of State

Entity Name: JUVENILE DIABETES RESEARCH FOUNDATION INTERNATIONAL (INCORPORATED)

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

120 WALL STREET 19 FLOOR

NEW YORK, NY 10005 US

Current Mailing Address: New Mailing Address:

120 WALL STREET 19 FLOOR

NEW YORK, NY 10005 US

FEI Number: 23-1907729 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:

 Title:
 CD
 ( ) Delete

 Name:
 JOHNSON, ROBERT W

 Address:
 630 FIFTH AVE. STE 1510

City-St-Zip: NEW YORK, NY 10111

 Title:
 CD
 ( ) Delete

 Name:
 BARKER, GORDON

 Address:
 150 NW 86TH AVE.

 City-St-Zip:
 PORTLAND, OR 97229

Title: PCEO () Delete
Name: VAN ETTON, PETER
Address: 120 WALL ST

City-St-Zip: NEW YORK, NY 10005

Title: CFOA () Delete Name: SEBOLD, EDWARD

Address: 2694 BIRCH AVE City-St-Zip: EAST MEADOW, NY 11554 Title: PCEO (X) Change ( ) Addition

Name: DONALD, ARNOLD

Address: 120 WALL STREET C/O JDRF- 19FL

City-St-Zip: NEW YORK, NY 10005

Title: CD (X) Change ( ) Addition

 Name:
 GERMAN, ROBERT

 Address:
 120 WALL STREET- 19TH FL

 City-St-Zip:
 NEW YORK, NY 10005

Title: COO (X) Change ( ) Addition

Name: HARDING, ROBIN

Address: 120 WALL STREET C/C JDRF- 19TH FL

City-St-Zip: NEW YORK, NY 10005

Title: CFOA (X) Change ( ) Addition

Name: SEBALD, EDWARD Address: 2694 BIRCH AVE

City-St-Zip: EAST MEADOW, NY 11554

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: EDWARD SEBALD CFO 02/07/2006