

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003735

FILED  
Mar 24, 2010  
Secretary of State

**Entity Name:** ANDEAN RESEARCH INSTITUTE, INC.

**Current Principal Place of Business:**

909 SE 5TH AVENUE  
SUITE 200  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

909 SE 5TH AVENUE  
SUITE 200  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 26-2545518

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COHEN, JEFFREY L  
909 SE 5TH AVENUE  
SUITE 200  
DELRAY BEACH, FL 33483 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: DC  
Name: HERRERA, JOSE L  
Address: 1456 WINTERBERRY  
City-St-Zip: HERNDON, VA 20170 US

Title: DP  
Name: BATH, JUDY  
Address: 1039 HILLSIDE CRES RR4  
City-St-Zip: HUNTSVILLE, ON P1H2J6 CA

Title: DTS  
Name: STANDLEE, ROBIN  
Address: 2655 N OCEAN DRIVE SUITE 110  
City-St-Zip: SINGER ISLAND, FL 33404 US

Title: D  
Name: HOSTALEK, LINDA  
Address: 2010 HICKORY RIDGE ROAD  
City-St-Zip: POMONA, IL 62975 US

Title: D  
Name: SPIEGELMAN, MARTI  
Address: PO BOX 251  
City-St-Zip: GRATON, CA 95444 US

Title: D  
Name: RATCLIFF, REBECCA  
Address: 1318 EASTMAN  
City-St-Zip: BOISE, ID 83702 US

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.

SIGNATURE: JEFFREY L COHEN

RA

03/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date

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3-24-10

MARCH 24, 2010

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
CORPORATE FILINGS  
PO BOX 6327  
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

PLEASE ADD THE FOLLOWING NAME AS THE 7<sup>TH</sup> DIRECTOR FOR ANDEAN  
RESEARCH INSTITUTE, INC. (DOCUMENT #N08000003735)

D

SEAN PATRICK MCPEAK  
150 SOUTH 600 EAST  
SUITE 3B  
SALT LAKE CITY, UT 84102 US

6 DIRECTOR/OFFICER POSITIONS WERE UTILIZED DURING ON-LINE FILING OF  
THE ANNUAL REPORT (CONFIRMATION #600173047206)

REGISTERED AGENT

JEFFREY L. COHEN  
909 SE 5<sup>TH</sup> AVENUE  
SUITE 200  
DELRAY BEACH, FL 33483  
(561) 455-7700