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COVER LETTER DIVISION TO THE PROPERTY OF THE P	
TO: New Filing Section Division of Corporations SUBJECT: Colon Cancer Alliance, Inc. (Name of Corporation - must include suffix)	¥Ş
Dear Sir or Madam:	
The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.	
Please return all correspondence concerning this matter to the following:	
Amy Kelly (Name of Person)	
Colon Cancer alliance (Firm/Company)	
5411 N. University Dr.	
Suite 202 (Address)	
Coral Springs, FL 33067 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Amy Kelly at 954 341-0212 (Area Code & Daytime Telephone Number)	
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\sum \text{\$78.75 Filing Fee & }\text{\$578.75 Filing Fee & }\text{\$287.50 Filing Fee & }\$	

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. State of Delaware 3. 86-0947831 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/1999 5. Dernetual (Duration! Year corp. will cease to exist or "perpetual")
6. 3 D1 Z000 (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)
7. 5411 N. University Dr. Stc 202, Coral Springs, FL 33067
1440 Coral Ridge Dr., Ste 386; Coral Springs, FL 33071
8. Non-profit patient advocacy organization (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Amy Kelly
Office Address: 5411 N. University Dr. Stc 202
Coval Springs Florida 33067 (Zip Code)
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
Registered agent's signature)
11. Attached is a certificate of existence duly authoriticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:	DIVISIONER
A. DIRECTORS	06 HAD 1975
Chairman: Kevin Lewis	06 MAR -9 AM 9: 47
Address: 1440 Coral Ridge Dr. Ste 386	
Coral Springs, FL 33071	
Vice Chairman:	<u></u>
Address:	
	
Director: Amy Kelly	·····
Address: 1440 Coral Ridge Dr. Ste 386	
Coral Springs, FL 33071	
Director:	
Address:	
B. OFFICERS	
President: LEFF Brown	
Address: 1440 Coval Ridge Dr. Ste 386	
Coral Springs, FL 33071	
Vice President:	
Address:	
Collins	
Secretary: Sandy White	C. 22-71
Address: 1440 Coral Ridge Dr., Ste 386 Coral Sprin	08, 45 330 11
Address: 1440 Coral Ridge Dr. Ste 386 Coral Spring	- (1) 22 0 - 11
Address: 1440 Ctrai Kidge Dr., Ste 386 Coral Sprin	ngs. FL 33071
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	or directors.
13. Ann Colle	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applicat	ion)
(Typed or printed name and capacity of person signing application)	

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLON CANCER ALLIANCE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF FEBRUARY, A.D. 2006.



Warriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4525867

DATE: 02-15-06

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