

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000003292

**Entity Name:** PREECLAMPSIA FOUNDATION, INC.**Current Principal Place of Business:**6767 N. WICKHAM RD., STE 400  
MELBOURNE, FL 32940**Current Mailing Address:**6767 N WICKHAM ROAD, SUITE 400  
MELBOURNE, FL 32940**FEI Number: 91-2073087****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TSIGAS, ELENI Z  
6767 N WICKHAM ROAD, SUITE 400  
MELBOURNE, FL 32940 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**Officer/Director Detail :**

Title            PRESIDENT  
Name            RIELLY-GAUVIN, KATHERINE  
Address        939 SHERBORNE CT.  
City-State-Zip: LIBERTYVILLE IL 60048

Title            TREASURER  
Name            RIELLY-GAUVIN, KATHERINE  
Address        939 SHERBORNE CT  
City-State-Zip: LIBERTYVILLE IL 60048

Title            SECRETARY  
Name            MAGUIRE, KATHY  
Address        1403 N. MAIN ST  
City-State-Zip: AUBURN IN 46706

Title            DIRECTOR  
Name            TSIGAS, ELENI  
Address        1020 WORTHINGTON SPRING DRIVE  
City-State-Zip: MELBOURNE FL 32940

Title            VP  
Name            FRAZER, BETH  
Address        7500 WATERVALE DRIVE  
City-State-Zip: NASHVILLE TN 37221

*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: ELENI TSIGAS****EXECUTIVE DIRECTOR****03/18/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date