## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#815663** 

FILED Jan 11, 2005 Secretary of State

Entity Name: PARENTS WITHOUT PARTNERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 1650 S DIXIE HWY SUITE 510 BOCA RATON, FL 334327461 US **New Mailing Address: Current Mailing Address:** 729 EAST PRATT STREET 7TH FLOOR-SC ARLETT PLACE BALTIMORE, MD 21202 US FEI Number: 13-5663691 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: UNITED STATES CORPORATION COMPANY 1201 HAYS STREET STE. 105 TALLAHASSEE, FL 32301 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: () Delete () Change () Addition WELLER, MARIE PRESIDE Name: Name: 87 ASHWICK DRIVE Address: Address: City-St-Zip: TORONTO, ONTARIO, CA M1K2L1 City-St-Zip: Title: () Delete Title: () Change () Addition LEIERZAPF, ROBERT TREASUR Name: Name: Address: 333 CONGRESS ALLEY Address: City-St-Zip: CARNEGIE, PA 15106 City-St-Zip: Title: () Delete Title: () Change () Addition TOUSEY, BOB VICE PR Name: Name: 3133 H NORMANDY WOOD DRIVE Address: Address: City-St-Zip: ELLICOTT CITY, MD 21043 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition ROSENBERG, SUE SECRETA AUSTIN, MARIE SECRETA Name: Name: Address: 2847 CARAMBOLA CIRCLE SOUTH Address: P.O. BOX 814 City-St-Zip: COCONUT CREEK, FL 33066 City-St-Zip: STRATFORD, CT 06615

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIE WELLER **PRES** 01/11/2005