

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 815663

FILED
Apr 02, 2010
Secretary of State

Entity Name: PARENTS WITHOUT PARTNERS, INC.

Current Principal Place of Business:

1650 S DIXIE HWY
SUITE 402
BOCA RATON, FL 334327461 US

New Principal Place of Business:

1100-H BRANDYWINE BLVD.
ZANESVILLE, OH 437017303 US

Current Mailing Address:

2905 FALLSTON ROAD
FALLSTON, MD 21047 US

New Mailing Address:

FEI Number: 13-5663691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PRES
Name: ADAMS, LOIS A
Address: 17920 SE TIBBETTS
City-St-Zip: PORTLAND, OR 97236 US

Title: SEC
Name: LISA, WOOD
Address: 7211 SE HARMONY RD #147
City-St-Zip: MILWAUKIE, OR 97222 US

Title: V.P
Name: KJOS, BRIAN
Address: 1410 CIMMARON CT
City-St-Zip: JOHNSBURG, IL 60051 US

Title: MEM
Name: HANSON, ANN
Address: 3802 CRAIG DRIVE
City-St-Zip: FLINT, MI 48506 US

Title: ZHP
Name: HAYES, SUEELLEN
Address: 1150 W. WINTON AVE #556
City-St-Zip: HAYWARD, CA 945451428 US

Title: ZAP
Name: GLADU, ANNE
Address: 103 ELMORE ST
City-St-Zip: WOONSOCKET, RI 02895 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: LEE HARRIS

COMP

04/02/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date