2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#816683

Entity Name: PEOPLE-TO-PEOPLE HEALTH FOUNDATION INC.

FILED Apr 25, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 255 CARTER HALL LANE MILLWOOD, VA 22646 **Current Mailing Address: New Mailing Address:** 255 CARTER HALL LANE MILLWOOD, VA 22646 FEI Number: 53-0242962 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: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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: COB () Delete () Change () Addition SANDERS, CHARLES A., Name: Name: EUROPA CENTER, 100 EUROPA DR #170 Address: Address: City-St-Zip: CHAPEL HILLS, NC 27514 City-St-Zip: Title: CFO () Delete Title: (X) Change () Addition JASTRZEBSKI, TED Name: JASTRZEBSKI, THADDEUS Name: Address: 255 CARTER HALL LANE Address: 255 CARTER HALL LANE City-St-Zip: MILLWOOD, VA 22646 City-St-Zip: MILLWOOD, VA 22646 Title: ACEO () Delete Title: CEO (X) Change () Addition MANCUSO, LESLIE D HOWE, JOHN P III, MD Name: Name: Address: 255 CARTER HALL LANE Address: 255 CARTER HALL LANE City-St-Zip: MILLWOOD, VA 22646 City-St-Zip: MILLWOOD, VA 22646 Title: DT () Delete Title: () Change () Addition Name: HENRY, WILLIAM L., Name: 1229 WASHINGTON STREET Address: Address: City-St-Zip: PITTSBURGH, PA 15228 City-St-Zip: Title: Title: () Delete () Change () Addition HOLMES, BEN L Name: Name: 1226 DEER RUN Address: Address: City-St-Zip: KETCHUM, ID 83340 City-St-Zip: Title: () Delete Title: (X) Change () Addition COLE, EDWARD N OGDEN. DAYTON Name: Name: Address: BRIARPATCH RANCH Address: 695 EAST MAIN STREET LOCKHART, TX 78644 STAMFORD, CT 06901 City-St-Zip: City-St-Zip:

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: THADDEUS J. JASTRZEBSKI CFO 04/25/2002