2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001468

Entity Name: CHINA ADOPTION WITH LOVE, INC.

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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251 HARVARD STREET, SUITE 17-19 BROOKLINE, MA 02446

Current Mailing Address: New Mailing Address:

251 HARVARD STREET, SUITE 17-19 660 24TH AVENUE NW BROOKLINE, MA 02446 NAPLES, FL 34120

FEI Number: 04-3289485 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, MICHAEL

1490 OAKES BLVD

NAPLES, FL 34119 US

THOMAS, MICHAEL

660 24TH AVENUE NW

NAPLES, FL 34120 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: MICHAEL D THOMAS 01/10/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete THOMAS, MICHAEL D THOMAS, MICHAEL D Name: Name: Address: 1490 OAKES BLVD Address: 660 24TH AVENUE NW City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34120 Title: () Delete Title: () Change () Addition Name: DAMON, DARRYL Name: Address: 5883 MARBLE COURT Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: Title: () Delete Title: () Change () Addition CHAZAL, LINDA Name: Name: 671 N. TOWN AND RIVE DRIVE Address: Address: City-St-Zip: FT.MYERS, FL 33919 City-St-Zip: Title: () Delete Title: () Change () Addition Name: KALMANS, AMY Name: 2100 CRAYTON RD. Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: () Change () Addition ZHANG, LILLIAN Y Name: Name: 159 HIGH STREET Address: Address: City-St-Zip: BROOKLINE, MA 02445 City-St-Zip: Title: () Delete Title: () Change () Addition LEWIS, NANCY Name: Name: Address: 6713 SLOANA PLACE Address: NAPLES, FL 34104 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: MICHAEL D THOMAS C 01/10/2005