

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001056

FILED
Jan 04, 2011
Secretary of State

Entity Name: PANCREATIC CANCER ACTION NETWORK, INC.

Current Principal Place of Business:

1500 ROSECRANS AVENUE
SUITE 200
MANHATTAN BEACH, CA 90266

New Principal Place of Business:

Current Mailing Address:

1500 ROSECRANS AVENUE
SUITE 200
MANHATTAN BEACH, CA 90266

New Mailing Address:

FEI Number: 33-0841281 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR
WESTON, FL 33331 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: T
Name: RICKERSON, STUART E
Address: P.O. BOX 510
City-St-Zip: RANCHO SANTA FE, CA 92067

Title: C
Name: KOVLER, PETER
Address: 1250 24TH STREET, STE 300
City-St-Zip: WASHINGTON, DC 20037

Title: S
Name: DAVIS, STEPHANIE R
Address: 5416 CHANDLER DR.
City-St-Zip: SHERMAN OAKS, CA 91401

Title: P
Name: FLESHMAN, JULIE
Address: 1500 ROSECRANS AVENUE, SUITE 200
City-St-Zip: MANHATTAN BEACH, CA 90266

Title: D
Name: HOLMBERG, STEVAN
Address: 6 COLEBROOK COURT
City-St-Zip: POTOMAC, MD 20854

Title: D
Name: KUHN, JASON
Address: 3900 W. KENNEDY BLVD.
City-St-Zip: TAMPA, FL 33609

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: JULIE FLESHMAN

P

01/04/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date