

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004866

FILED
Apr 21, 2010
Secretary of State

Entity Name: CENTER FOR BIO-ETHICAL REFORM, INC.

Current Principal Place of Business:

26882 VISTA TERRACE
LAKE FOREST, CA 92630

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560625
ORLANDO, FL 328560625

New Mailing Address:

FEI Number: 33-0443975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF ORLANDO
300 S. ORANGE AVE., SUITE 1000 (MJG)
ORLANDO, FL 32801 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: PCD
Name: LITCHFIELD, JIM
Address: P.O. BOX 219
City-St-Zip: LAKE FOREST, CA 92609

Title: SD
Name: CUNNINGHAM, GREGG
Address: P.O. BOX 219
City-St-Zip: LAKE FOREST, CA 92609

Title: TD
Name: NEAL, RUSSEL A II
Address: P.O. BOX 219
City-St-Zip: LAKE FOREST, CA 92609

Title: D
Name: PAVONE, FRANK FR.
Address: P.O. BOX 219
City-St-Zip: LAKE FOREST, CA 92609

Title: D
Name: LOPEZ, STEPHEN B
Address: P.O. BOX 219
City-St-Zip: LAKE FOREST, CA 92609

Title: D
Name: CHILDRESS, CLENARD JR.,REV
Address: P.O. BOX 219
City-St-Zip: LAKE FOREST, CA 92609

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: GREGG CUNNINGHAM

SD

04/21/2010

Electronic Signature of Signing Officer or Director

_____ Date