

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001995

FILED
Jan 31, 2008
Secretary of State

Entity Name: CONSUMER DRIVEN BENEFITS ASSOCIATION OF AMERICA, INC.

Current Principal Place of Business:

515 NEW JERSEY - STE G
REDLANDS, CA 92373

New Principal Place of Business:

Current Mailing Address:

300 N COIT RD
STE 350
RICHARDSON, TX 75080

New Mailing Address:

FEI Number: 81-0627775 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: C () Delete
Name: BOYD, C N
Address: 1123 CEDAR AVE
City-St-Zip: REDLANDS, CA 92373

Title: PD () Delete
Name: DOUCETTE, LETITIA D
Address: 25833 DRACAEA AVE
City-St-Zip: MORENO VALLEY, CA 92553

Title: SD () Delete
Name: DOUCETTE, EARL J
Address: 25833 DRACAEA AVE
City-St-Zip: MORENO VALLEY, CA 92553

Title: VP () Delete
Name: LAPARNE, CHRISTOPHER T
Address: 150 RUBY AVE
City-St-Zip: HAMET, CA 925437643

Title: T () Delete
Name: CAMPOS, DEBRA ANN
Address: 1820 MENTONE BLVD
City-St-Zip: MENTONE, CA 92359

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BOYD, CHARLES N
Address: 1123 CEDAR AVE
City-St-Zip: REDLANDS, CA 92373

Title: PD (X) Change () Addition
Name: DOUCETTE, LETITIA D
Address: 13026 ACACIA AVE
City-St-Zip: MORENO VALLEY, CA 92553

Title: SD (X) Change () Addition
Name: DOUCETTE, EARL J
Address: 13026 ACACIA AVE
City-St-Zip: MORENO VALLEY, CA 92553

Title: VP (X) Change () Addition
Name: LAPARNE, CHRISTOPHER T
Address: 150 RUBY AVE
City-St-Zip: HEMET, CA 925437643

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLES N. BOYD

CEO

01/31/2008

Electronic Signature of Signing Officer or Director

Date