2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2011
Secretary of State

DOCUMENT# F07000003606

Entity Name: EDEN INSTITUTE FOUNDATION, INC.

Current Principal Place of Business:

ONE EDEN WAY
PRINCETON, NJ 08540

New Principal Place of Business:

Current Mailing Address:

ONE EDEN WAY
PRINCETON, NJ 08540

New Mailing Address:

FEI Number: 22-4215005 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORIDA, EDEN
24860 BURNT PINE DRIVE BLDG 6 STE 3
BONITA SPRINGS, FL 34134 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
Name: FREDE, JASON
Address: 14 HOLLY LANE
City-St-Zip: LAWRENCEVILLE, NJ 08648

Title: VC
Name: GARY, MARIE
Address: 49 FITCH WAY
City-St-Zip: PRINCETON, NJ 08540

Title: VC
Name: TARR, CHRISTOPHER
Address: 100 LENOX DRIVE, STE. 200
City-St-Zip: LAWRENCEVILLE, NJ 08648

Title: P
Name: MCCOOL, THOMAS P
Address: 78 SCHINDLER CT
City-St-Zip: LAWRENCEVILLE, NJ 08648

Title: S
Name: PAPAROZZI, LOUIS
Address: 33 WYGANT ROAD
City-St-Zip: CREAM RIDGE, NJ 08514

Title: T
Name: SCHWALLIE, EDWARD
Address: 1514 WISHING WELL LANE
City-St-Zip: MANASQUAN, NJ 08736

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: THOMAS P. MCCOOL P 01/04/2011

Electronic Signature of Signing Officer or Director — Date