

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005398

FILED
Feb 16, 2009
Secretary of State

Entity Name: ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION, INC.

Current Principal Place of Business:

225 N. MICHIGAN AVE.
17TH FLOOR
CHICAGO, IL 60601

New Principal Place of Business:

Current Mailing Address:

225 N. MICHIGAN AVE.
17TH FLOOR
CHICAGO, IL 60601

New Mailing Address:

FEI Number: 13-3039601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARM 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: D () Delete
Name: ATTEA, PAUL
Address: 225 N. MICHIGAN AVE. #17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: OSHER, JOHN
Address: 225 N. MICHIGAN AVE. #17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: THOMPSON, EVAN
Address: 225 N. MICHIGAN AVE., 17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: COLEMAN, LAUREL
Address: 225 N. MICHIGAN AVE., 17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: URBUT, MICHAEL
Address: 225 N. MICHIGAN AVE., 17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: MOSCOW, DAVID
Address: 225 N. MICHIGAN AVE., 17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BERUBE, EDWARD
Address: 225 N. MICHIGAN AVE. #17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

Title: D (X) Change () Addition
Name: ALBERT, MARILYN
Address: 225 N. MICHIGAN AVE., 17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

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

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

Title: D (X) Change () Addition
Name: ARTHUR, MICHAEL
Address: 225 N. MICHIGAN AVE., 17TH FLOOR
City-St-Zip: CHICAGO, IL 60601

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: PAUL ATTEA

D

02/16/2009

Electronic Signature of Signing Officer or Director

Date