## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000003884

Entity Name: EDEN INSTITUTE INC.

FILED Feb 26, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1 EDEN WAY PRINCETON, NJ 08540 **Current Mailing Address: New Mailing Address:** 1 EDEN WAY PRINCETON, NJ 08540 FEI Number: 22-2069597 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCOOL, THOMAS P EDEN FLÓRIDA 13631 LEARNING COURT FORT MYERS, FL 33919 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete RICHARDSON, NANCY HUMES, ROBERT Name: Name: 5 TWIN OAKS DRIVE Address: 7 CONGRESSIONAL COURT Address: City-St-Zip: LAWRENCEVILLE, NJ 08648 US City-St-Zip: SKILLMAN, NJ 08558 US Title: VC ( ) Delete Title: () Change () Addition HUNTER, CAROL Name: Name: Address: 1 DELTA DRIVE Address: City-St-Zip: OCEAN, NJ 07712 US City-St-Zip: Title: TTR () Delete Title: (X) Change ( ) Addition VAN LEEUWEN, KENNETH Name: WALKER, THOMAS Name: 3 STATE PARK COURT Address: 13 DEER PATH Address: City-St-Zip: GLADSTONE, NJ 07937 US City-St-Zip: GOULDSBORO, PA 18424 US Title: ( ) Delete Title: TR (X) Change ( ) Addition Name: ANDORS, LEON Name: VANLEEUWEN, KENNETH Address: 19 RACE STREET Address: 13 DEER PATH City-St-Zip: PITTSTOWN, NJ 08867 US City-St-Zip: GLADSTONE, NJ 07934 US Title: () Delete Title: (X) Change ( ) Addition MC COOL, THOMAS P ANDORS, LEON Name: Name: 1 EDEN WAY 19 RACE STREET Address: Address: PRINCETON, NJ 08540 US PITTSTOWN, NJ 08867 US City-St-Zip: City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition MC COOL, THOMAS P Name: Name: 1 EDEN WAY Address: Address: PRINCETON, NJ 08540 US City-St-Zip: 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: THOMAS P. MCCOOL PD 02/26/2008