

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003884

FILED
Jan 04, 2011
Secretary of State

Entity Name: EDEN INSTITUTE INC.

Current Principal Place of Business:

1 EDEN WAY
PRINCETON, NJ 08540

New Principal Place of Business:

Current Mailing Address:

24860 BURNT PINE DRIVE
BLDG 6
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 22-2069597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOOL, THOMAS P
EDEN FLORIDA
13631 LEARNING COURT
FORT MYERS, FL 33919 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 US

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

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

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

Title: P
Name: MC COOL, THOMAS P
Address: 1 EDEN WAY
City-St-Zip: PRINCETON, NJ 08540 US

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

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