

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F96000003884

FILED
Jan 21, 2003
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:

1 EDEN WAY
PRINCETON, NJ 08540

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:

ISLER, VICKI
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 () Delete
Name: NOONAN, WILLIAM
Address: 51 CLARKE CT
City-St-Zip: PRINCETON, NJ 08540

Title: VC () Delete
Name: PAPAROZZI, LOUIS
Address: 33 W 19 ANT ROAD
City-St-Zip: CREAMRIDGE, NJ 08514

Title: TTR () Delete
Name: NAPODA, JAMES
Address: 90 NASSAU ST.
City-St-Zip: PRINCETON, NJ

Title: S () Delete
Name: GOLDMAN, ROBERT
Address: 4933 TAMiami TRAIL NORTH SUITE #203
City-St-Zip: NAPLES, FL 34103

Title: PD () Delete
Name: HOLMES, DAVID L
Address: EDEN WAY 1
City-St-Zip: PRINCETON, NJ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TTR (X) Change () Addition
Name: NAPODA, JAMES
Address: 370 SCOTCH ROAD
City-St-Zip: WEST TRENTON, NJ 08628 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID L. HOLMES

PD

01/21/2003

Electronic Signature of Signing Officer or Director

Date