

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000898

FILED  
Feb 09, 2006  
Secretary of State

**Entity Name:** PRADER-WILLI SYNDROME ASSOCIATION (USA) INCORPORATED

**Current Principal Place of Business:**

5700 MIDNIGHT PASS RD., STE. 6  
SARASOTA, FL 34242

**New Principal Place of Business:**

**Current Mailing Address:**

5700 MIDNIGHT PASS RD., STE. 6  
SARASOTA, FL 34242

**New Mailing Address:**

**FEI Number:** 41-1306908

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HEINEMANN, JANALEE  
5700 MIDNIGHT PASS RD., STE. 6  
SARASOTA, FL 34242 US

**Name and Address of New Registered Agent:**

COYNE, ANN  
5700 MIDNIGHT PASS RD., STE. 6  
SARASOTA, FL 34242 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: ANN COYNE

02/09/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: HEARN, CAROL  
Address: 705 OLIVE LANE N  
City-St-Zip: PLYMOUTH, MN 554477

Title: PRES ( ) Delete  
Name: LOKER, CAROLYN  
Address: 22873 CHERRY HILL COURT  
City-St-Zip: MATTAWAN, MI 49071

Title: T ( ) Delete  
Name: GOLDBERGER, KAREN  
Address: 6215 APPOMATTOX RD  
City-St-Zip: DAVENPORT, IA 52806

Title: SEC ( ) Delete  
Name: DOHERTY, JULIE  
Address: 3623 CRAIG'S HOUSE COURT  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP ( ) Delete  
Name: SMITH, KEN  
Address: 6301 NORTHUMBERLAND STREET  
City-St-Zip: PITTSBURGH, PA 15217

Title: D ( ) Delete  
Name: MCMANUS, BARBARA  
Address: 2570 DAVID DRIVE  
City-St-Zip: NIAGRA FALLS, NY 14304

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C BD (X) Change ( ) Addition  
Name: HEARN, CAROL  
Address: 705 OLIVE LANE N  
City-St-Zip: PLYMOUTH, MN 554477

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

Title: TREA (X) Change ( ) Addition  
Name: GOLDBERGER, KAREN  
Address: 6215 APPOMATTOX RD  
City-St-Zip: DAVENPORT, IA 52806

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

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

Title: DIR (X) Change ( ) Addition  
Name: AGARWAL, JANICE  
Address: 1715 CONTINENTAL DRIVE  
City-St-Zip: ZIONSVILLE, IN 46077

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN GOLDBERGER

TREA

02/09/2006

Electronic Signature of Signing Officer or Director

Date