

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000898

FILED  
Feb 15, 2011  
Secretary of State

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

**Current Principal Place of Business:**

8588 POTTER PARK DRIVE  
SUITE 500  
SARASOTA, FL 34238

**New Principal Place of Business:**

**Current Mailing Address:**

8588 POTTER PARK DRIVE  
SUITE 500  
SARASOTA, FL 34238

**New Mailing Address:**

**FEI Number:** 41-1306908

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIDDLETON, SHARON M MGR  
8588 POTTER PARK DRIVE  
SUITE 500  
SARASOTA, FL 34238 US

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

APPLEBEE, DEBI MGR  
8588 POTTER PARK DRIVE  
SUITE 500  
SARASOTA, FL 34238 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: DEBI APPLEBEE

02/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DC  
Name: HEYBACH, JOHN  
Address: 2128 N SEDGWICK ST TOWNHOUSE 7  
City-St-Zip: CHICAGO, IL 60614

Title: DC  
Name: KEN, SMITH  
Address: 1405 SHADY AVENUE  
City-St-Zip: PITTSBURGH, PA 15217

Title: T  
Name: ROBERTO, MARTINEZ  
Address: 5001 LAKEWOOD RANCH BLVD N SUITE 101  
City-St-Zip: SARASOTA, FL 34240

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

Title: D  
Name: HEADLEY, KERRY  
Address: 2112 JERVIS ROAD  
City-St-Zip: UPPER ARLINGTON, OH 43221

Title: D  
Name: LEIGHTMAN, STEPHEN  
Address: 1630 PRINCE DRIVE  
City-St-Zip: CHERRY HILL, NJ 08003

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: EVAN FARRAR

ED

02/15/2011

Electronic Signature of Signing Officer or Director

Date