

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006402

FILED
May 03, 2006
Secretary of State

Entity Name: UNITED STATES BREASTFEEDING COMMITTEE, INC.

Current Principal Place of Business:

2025 M ST, NW
STE 800
WASHINGTON, DC 20036

New Principal Place of Business:

Current Mailing Address:

2025 M ST, NW
STE 800
WASHINGTON, DC 20036

New Mailing Address:

FEI Number: 59-3674883 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LINDENBERGER, JAMES H
4809 E BUSCH BLVD
STE 104
TAMPA, FL 33617 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: CD () Delete
Name: NAYLOR, AUDREY MD
Address: 2260 SAN JUAN RD
City-St-Zip: SAN DIEGO, CA 92103

Title: VCD () Delete
Name: LAWRENCE, RUTH MD
Address: 1836 CLOVER ST
City-St-Zip: ROCHESTER, NY 14642

Title: TD () Delete
Name: KOLAR, CAROL
Address: 1400 N MEACHAM RD
City-St-Zip: SCHAUMBURG, IL 60168

Title: S () Delete
Name: SMITH, LINDA
Address: 6540 CEDARVIEW CT
City-St-Zip: DAYTON, OH 45459

Title: S () Delete
Name: CRENSHAW, JEANNETTE
Address: 2629 ASHGLEN DR
City-St-Zip: GARLAND, TX 75043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: CAROL A KOLAR

TD

05/03/2006

Electronic Signature of Signing Officer or Director

Date