2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

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Entity Name: TREASURE COAST RESEARCH FOUNDATION, INC.

Current Principal Place of Business:

330 17TH STREET
VERO BEACH, FL 32960 US

New Principal Place of Business:

330 17TH STREET
SUITE E
VERO BEACH, FL 32960 US

Current Mailing Address:

330 17TH STREET
VERO BEACH, FL 32960 US

New Mailing Address:

330 17TH STREET
SUITE E
VERO BEACH, FL 32960 US

FEI Number: 20-0024589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KANCILIA, JOHN R
1800 WEST HIBISCUS BOULEVARD
SUITE 138
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

KANCILIA, JOHN R
1795 WEST NASA BLVD
MELBOURNE, FL 32901 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: JOHN R. KANCILIA 03/25/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ANDERSON, JANET M.D.
Address: 372 17TH ST
City-St-Zip: VERO BEACH, FL 32960 US

Title: D ( ) Delete
Name: CELANO, CHARLES N M.D.
Address: 3607 15TH AVENUE
City-St-Zip: VERO BEACH, FL 32960 US

Title: D ( ) Delete
Name: TEE, HOWARD M.D.
Address: 960 37TH PL
City-St-Zip: VERO BEACH, FL 32960 US

Title: D ( ) Delete
Name: SHAREEF, BABAR M.D.
Address: 2215 NEBRASKA AVENUE, SUITE 2-E
City-St-Zip: FORT PIERCE, FL 32950 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGRM (X) Change ( ) Addition
Name: CELANO, CHARLES M.D.
Address: 3607 15TH AVENUE
City-St-Zip: VERO BEACH, FL 32960 US

Title: MGRM (X) Change ( ) Addition
Name: ANDERSON, JANET E M.D.
Address: 3745 11TH CIRCLE
City-St-Zip: VERO BEACH, FL 32960 US

Title: MGRM (X) Change ( ) Addition
Name: TEE, HOWARD M.D.
Address: 960 37TH PL
City-St-Zip: VERO BEACH, FL 32960 US

Title: MGRM (X) Change ( ) Addition
Name: SHAREEF, BABAR M.D.
Address: 2215 NEBRASKA AVENUE, SUITE 2-E
City-St-Zip: FORT PIERCE, FL 34950 US

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES CELANO MGRM 03/25/2009
Electronic Signature of Signing Officer or Director Date