2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000950

FILED Apr 14, 2008 Secretary of State

Entity Name: FLORIDA COALITION ON DONATION, INC.

Current Principal Place of Business: New Principal Place of Business:

40 SARASOTA CENTER BLVD. SUITE 107 SARASOTA, FL 342408758 US

New Mailing Address: Current Mailing Address:

40 SARASOTA CENTER BLVD. SUITE 107 SARASOTA, FL 342408758 US

FEI Number: 20-1169939 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARROLL, CHRISTOPHER M 40 SARASOTA CENTER BLVD. SUITE 107 SARASOTA, FL 342408758 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

GARCIA, KARÉN

1801 NW 9TH, SUITE 150A

(X) Change () Addition

() Delete KROUSE, JENNIFER Name: Name: 409 BAYSHORE BLVD. Address: Address:

City-St-Zip: TAMPA, FL 33606 City-St-Zip:

MIAMI, FL 33136

Title: VCV () Delete Title: (X) Change () Addition GARCIA, KAREN Name: MCMILLEN, LESLEY Name:

Address: 1801 NW 9TH, SUITE 150A Address: 1560 ORANGE AVE City-St-Zip: MIAMI, FL 33136 City-St-Zip: WINTER PARK, FL 32789

Title: () Delete Title: (X) Change () Addition

ADDARIO, JOHN FROST, TERRY Name: Name: Address: 1410 N 21ST STREET Address: 1410 N 21ST STREET City-St-Zip: TAMPA, FL 33605 City-St-Zip: TAMPA, FL 33605

Title: DS () Delete Title: () Change () Addition

Name: CARROLL, CHRISTOPHER Name: Address: 40 SARASOTA CENTER BLVD., #107 Address: City-St-Zip: SARASOTA, FL 342408758 City-St-Zip:

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: CHRISTOPHER CARROLL DS 04/14/2008