

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001951

FILED
Apr 19, 2010
Secretary of State

Entity Name: IN NEED OF DIAGNOSIS, INC.

Current Principal Place of Business:

1412 1/2 E. CONCORD STREET
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 536456
ORLANDO, FL 32853 US

New Mailing Address:

FEI Number: 13-4321652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GENETTI, MARIANNE
1412 1/2 E. CONCORD STREET
ORLANDO, FL 32803 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: MS.
Name: GENETTI, MARIANNE
Address: 1412 1/2 E. CONCORD STREET
City-St-Zip: ORLANDO, FL 32803 US

Title: MS.
Name: SHUMAKER, LORRAINE
Address: 5395 L.B. MCLEOD RD.
City-St-Zip: ORLANDO, FL 32811 US

Title: MRS.
Name: HOCHMAN, MARILYN ESQ.
Address: 40 ALEXANDRIA BLVD., STE. 1030
City-St-Zip: OVIEDO, FL 32765 US

Title: MS.
Name: MILLER, PATRICIA
Address: 1514 NATURE COURT
City-St-Zip: WINTER SPRINGS, FL 32703

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: MARIANNE GENETTI

PRES

04/19/2010

Electronic Signature of Signing Officer or Director

Date