## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000001761

Entity Name: TRELEXA FOUNDATION, INC

FILED Apr 19, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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171 LOST BRIDGE DR 300 CENTER DR PALM BEACH GARDENS, FL 33410 SUITE G-319

SUPERIOR, CO 80027

Current Mailing Address: New Mailing Address:

171 LOST BRIDGE DR
PALM BEACH GARDENS, FL 33410
300 CENTER DR
SUITE G-319

SUPERIOR, CO 80027

FEI Number: 11-3805259 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:

WATKINS, KENNETH J
171 LOST BRIDGE DR
WATKINS, KENNETH J
411 OPAL WAY

PALM BEACH GARDENS, FL 33410 US SUPERIOR, FL 80027 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: 04/19/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WATKINS, KENNETH J
 Name:
 WATKINS, KENNETH J

 Address:
 171 LOST BRIDGE DR
 Address:
 411 OPAL WAY

 City-St-Zip:
 PALM BEACH GARDENS, FL 33410
 City-St-Zip:
 SUPERIOR, CO 80027

Title: DIR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 COLEMAN, ANGELA
 Name:

 Address:
 4321 RALEIGH ST
 Address:

 City-St-Zip:
 DENVER, CO 80212
 City-St-Zip:

Title: DIR () Delete Title: () Change () Addition

 Name:
 KRYZA, KATHLEEN
 Name:

 Address:
 801 ROSA AVE
 Address:

 City-St-Zip:
 ANN ARBOR, MI 48104
 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: KENNETH J WATKINS PRES 04/19/2008