2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007001

Jul 28, 2009 Secretary of State

Entity Name: LYMPHANGIOMATOSIS & GORHAM'S DISEASE ALLIANCE, INC.

Current Principal Place of Business: New Principal Place of Business: 19919 VILLA LANTE PLACE BOCA RATON, FL 334345632 **Current Mailing Address: New Mailing Address:** 19919 VILLA LANTE PLACE P.O. BOX 970153 BOCA RATON, FL 334345632 BOCA RATON, FL 334970153 FEI Number: 26-1224181 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: Name and Address of New Registered Agent: KELLY, JOHN F 19919 VILLA LANTE PLACE BOCA RATON, FL 334345632 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: (X) Change () Addition () Delete HERBERT-BRANDE, SONIA GAREAU, SHANNON Name: Name: 770 SOUTH RIDGE STREET Address: 4923 WINDSONG CR Address: City-St-Zip: SOUTHERN PINES, NC 28387 City-St-Zip: KELONA, BC VIW 4Y2 CA Title: Title: (X) Change () Addition () Delete GOLDFARB, SANDRA Name: GOLDFARB, SANDRA Name: Address: 46 OAKDENE ROAD Address: 46 OAKDENE ROAD City-St-Zip: BARRINGTON, IL 60010 City-St-Zip: BARRINGTON, IL 60010 Title: () Delete Title: D/P (X) Change () Addition KELLY, JOHN F KELLY, JOHN F Name: Name: 19919 VILLA LANTE PLACE 19919 VILLA LANTE PLACE Address: Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 Title: () Delete Title: D/C (X) Change () Addition Name: WIESNER, SCOT Name: WIESNER, SCOT 628 OAK STREET BOX 9 Address: Address: 628 OAK STREET BOX 9 City-St-Zip: BROWNSVILLE, WI 53006 City-St-Zip: BROWNSVILLE, WI 53006 Title: () Delete Title: () Change () Addition GAMMON, ALLAN Name: Name: 214 MANAGAONE RD Address: Address: City-St-Zip: WAIKANAE, NZ City-St-Zip: Title: () Delete Title: (X) Change () Addition GAREAU, SHANNON SHEETS, JANA K Name: Name: Address: 4923 WINDSONG CR Address: 1520 JOHN JONES ROAD KELONA, BC VIW 4Y2 BAHAMA, NC 27503

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.

City-St-Zip:

SIGNATURE: JOHN F. KELLY D/P 07/28/2009

City-St-Zip: