

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010571

FILED  
May 15, 2010  
Secretary of State

**Entity Name:** INTERNATIONAL INSTITUTE FOR INTEGRATED HEALTH AND HIGHER CONSCIOUSNESS, INC.

**Current Principal Place of Business:**

251 CRANDON BOULEVARD  
UNIT 107  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

251 CRANDON BOULEVARD  
UNIT 107  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

P.O. BOX 1221  
NORTH HAMPTON, NH 03862

**FEI Number:** 26-4113263      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

NOSTRO, LOUIS  
201 SOUTH BISCAYNE BOULEVARD  
SUITE 1600  
MIAMI, FL 33131 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:**

Title: D  
Name: EMONDS, KENNETH J PH.D  
Address: PO BOX 1221  
City-St-Zip: NORTH HAMPTON, NH 03862

Title: D  
Name: EMONDS, KATHERINE K  
Address: PO BOX 1221  
City-St-Zip: NORTH HAMPTON, NH 03862

Title: D  
Name: MCLAUGHLIN, ELIZABETH  
Address: 251 CRANDON BOULEVARD, UNIT 107  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D  
Name: SPENCER, MARY M  
Address: 251 CRANDON BOULEVARD, UNIT 107  
City-St-Zip: KEY BISCAYNE, FL 33149

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: ELIZABETH MCLAUGHLIN

D

05/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date