

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003730

FILED  
Jan 10, 2012  
Secretary of State

Entity Name: MY DONATION NETWORK, INC.

**Current Principal Place of Business:**

17905 SW 216 STREET  
MIAMI, FL 33170

**New Principal Place of Business:**

**Current Mailing Address:**

17905 SW 216 STREET  
MIAMI, FL 33170

**New Mailing Address:**

FEI Number: 45-2514434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUTLER, CATHY  
17905 SW 216 STREET  
MIAMI, FL 33170 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: PVST  
Name: BUTLER, CATHY  
Address: 17905 SW 216 STREET  
City-St-Zip: MIAMI, FL 33170

Title: D  
Name: BUTLER, CATHY  
Address: 17905 SW 216 STREET  
City-St-Zip: MIAMI, FL 33170

Title: D  
Name: ST. AUBIN, BARBARA  
Address: 19441 SW 308 STREET  
City-St-Zip: HOMESTEAD, FL 33030

Title: D  
Name: BUTLER, GEORGE C III  
Address: 17905 SW 216 STREET  
City-St-Zip: MIAMI, FL 33170

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: CATHY BUTLER

PVST

01/10/2012

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

\_\_\_\_\_  
Date