2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N19169 1. Entity Name CHILDREN'S WORLD BLOOD BANK, INC.					SECRETARY OF STATE DIVISION OF CORPORATIONS 03 MAY -7 AM 9: 32				
Principal-Plac	e of Business	Mailing Address				001			
933 45TH STREET 93		% JOHN H. FLYNN 933 45TH STREET WEST PALM BEACH FL 33407-2413		ļ	 	IE IDIEI ILDIA OMIBERUI	âlâst Blâit Biasi Biâli Blâ		
2. Principal Place of Business 3.		3. Mailing Address	. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-0877825 Applied For Not Applicab		t Applicable		
Zip	Country	Zip	Country		5. Certificate of Sta		\$8.75 Add Fee Required	itional	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent Name					
FLYNN, JOHN H.				Street Address (P.O. Box Number is Not Acceptable)					
933 45TH STREET WEST PALM BEACH FL 33407				Cited Address (I. S. 25 Mainles & Not Acceptable)					
WESTER	EM DEACHTE 33401		City				Zip Code		
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8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW: FEE IS \$61.25 9. Election Campaign F Trust Fund Contributi					\$5.00 May Be Added to Fees		Check Payable to Department of S		
10. 3	OFFICERS AND DIRE		11.	A	DDITIONS/CHANGE	S TO OFFICERS A			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ARVIDSON, PHILIP L 933 45TH STREET WEST PALM BEACH FL 33407	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE	D PERMED THE	☐ Delete	TITLE			<u> </u>	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	REEVER, TIM 933 45TH STREET WEST PALM BEACH FL 33407		NAME STREET ADDRESS CITY-ST-ZIP	İ	400 0 05/07/03-	01846 -01104-0	4724 05 **70.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLYNN, JOHN J 933 45TH STREET	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FLY	WN, John	H.	Change	☐ Addition	
TITLE	WEST PALM BEACH FL 33407 VCD	☐ Delete	TITLE	wes	of Halm B	ench, rc	☐ Change	☐ Addition	
NAME	SOUTH, LAURA	i Delete	NAME				□ Onlange		
STREET ADDRESS !	933 45TH STREET WEST PALM BEACH FL 33407		STREET ADDRESS CITY-ST-ZIP						
TITLE	D D	□ Delete	TITLE	· · · · ·		<u> </u>		Addition	
NAME STREET ADDRESS CITY-ST-ZIP	EASSA, MICHELE 933 45TH STREET WEST PALM BEACH FL 33407		NAME STREET ADDRESS CITY-ST-ZIP	İ				ļ	
TITLE NAME STREET ADDRESS	D Vandergrift, Paul 933 45th St.	☐ Delete	TITLE NAME STREET ADDRESS				☐ Change	Addition	
CITY-ST-ZIP	WEST PALM BEACH FL 33407		CITY-ST-ZIP			<u></u>			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if the changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURED

561-845-2323

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CHILDREN'S WORLD BLOOD BANK, INC. BOARD OF DIRECTORS

Laura South, Vice Chair/Director 933 45th Street
West Palm Beach, FL 33407

Rob Holroyd, Director 933 45th Street West Palm Beach, FL 33407

Theodore Moffett, Secretary/Treasurer, Director 933 45th Street
West Palm Beach, FL 33407

Paul Van der Grift, Director 933 45th Street West Palm Beach, FL 33407

Tim Reever, Director 933 45th Street West Palm Beach, FL 33407

Michele L. Eassa, Director 933 45th Street West Palm Beach, FL 33407