


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # N48489 1. Entity Name <u> </u> VOLUNTEER SCIENTIFIC RESEARCH TEAM, INC.	
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Principal Place of Business 17121 PRIMAVERA CIR CAPE CORAL, FL 33909	Mailing Address 17121 PRIMAVERA CIR CAPE CORAL, FL 33909
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03242008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0338294	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HASSETT, SUSAN 17121 PRIMAVERA CIR CAPE CORAL, FL 33908
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IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000901304 04/29/08-80063-023 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROWN, JENNIFER 4527 PELICAN BLVD CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HASSETT, SUSAN 17121 PRIMAVERA CIRCLE CAPE CORAL, FL 33909
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEIST, LORRAINE 17568 BRADDOCK ROAD FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRENNAN, MARC 1411 N.E. 17TH STREET CAPE CORAL, FL 33909
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Lorraine Heist</u> LORRAINE HEIST	<u>3/25/2008</u> 3/25/2008	<u>239-896-7521</u> 239-896-7521
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>