2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2007
Secretary of State

DOCUMENT# N97000003808

Entity Name: COSHARE, INC.

Current Principal Place of Business:

1719 MAHAN DRIVE
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

2675 EGRET LANE
TALLAHASSEE, FL 32308 US

Current Mailing Address:

1719 MAHAN DRIVE
TALLAHASSEE, FL 32308 US

New Mailing Address:

2958 FOXCROFT DR.
TALLAHASSEE, FL 32309 US

FEI Number: 59-3457740 **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:

ELLIOTT, MADONNA F ESQ.
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

KAHN, DAVID B MD.
2958 FOXCROFT DR.
TALLAHASSEE, FL 32309 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: DAVID B. KAHN 09/03/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KAHN, DAVID
Address: 2675 EGRET LN
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete
Name: MCKINNEY, MEREDITH
Address: 5950 MILLERS LANDING RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Delete
Name: ELLIOTT, MADONNA F
Address: 660 E JEFFERSON ST
City-St-Zip: TALLAHSSSEE, FL 32301

Title: D (X) Delete
Name: FREDRICK, JEFFREY R
Address: 1719 MAHAN DR
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition
Name: KAHN, DAVID
Address: 2675 EGRET LN
City-St-Zip: TALLAHASSEE, FL 32308

Title: DR. (X) Change ( ) Addition
Name: MCKINNEY, MEREDITH
Address: 5950 MILLERS LANDING RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: DAVID B. KAHN D 09/03/2007
Electronic Signature of Signing Officer or Director Date