

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90376 018 ****61.25

DOCUMENT # N99000005206					
1. Entity Name CHILDHOOD ANXIETY NETWORK INC					
Principal Place of Business 3741 LOCKE LANE PROSPECT, KY 40059 US			Mailing Address 3741 LOCKE LANE PROSPECT, KY 40059 US		
2. Principal Place of Business - No P.O. Box # 14 Middlebrook Rd. Suite, Apt. #, etc.		3. Mailing Address P.O. Box 2207 Suite, Apt. #, etc.			
City & State Dover, NH Zip: 03820 Country: USA		City & State Dover, NH Zip: 03821-2207 Country: USA		4. FEI Number 65-0946164	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SILVER, NATALIE 3020 NW 23RD CT. BOCA RATON, FL 33431			7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: _____ FL Zip Code: _____		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AUDREY, BOGGS DR. PO BOX 491542 LOS ANGELES, CA 90049	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 911 Montana Ave., Apt. C Santa Monica, CA 90403	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARDULLA, TERESA 3 HATHAWAY DR PRINCETON JUNCTION, NJ 08550	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KERVATT, GAIL 54 OLD FOURTH DR OAK RIDGE, NJ 07438	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	54 Old Fourth Road	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEASTMAN, KRISTEN 5357 KILBOURNE DR. CLEVELAND, OH 44124	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Eastman, Kristen Lyndhurst, OH 44124	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYNN, LUNCEFORD 2356 MOORE ST., SUITE 101 SAN DIEGO, CA 92110	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES, MATTEO 1070 STILL MEADOW CROSSING CHARLOTTESVILLE, VA 22901	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____	☐ Change ☐ Addition
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>Joleen K. Fernald</u> <u>Joleen K. Fernald, Treasurer</u> <u>05-25-08</u> <u>603 498 7825</u>					

* Additional Board Members / Officers

ATTACHMENT

40086059

#N99000005206

As of February 4, 2008

SMG Board Member Contact List

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Director Emeritus

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