2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005206

FILED Feb 18, 2010 Secretary of State

Entity Name: CHILDHOOD ANXIETY NETWORK INC

Current Principal Place of Business: New Principal Place of Business:

14 MIDDLEBROOK ROAD 19 SEPTEMBER DR

DOVER, NH 03820 US GREENLAND, NH 03840 US

Current Mailing Address: New Mailing Address:

PO BOX 2207

DOVER, NH 038212207 US

FEI Number: 65-0946164 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SILVER, NATALIE 3020 NW 23RD CT. BOCA PATON EL 33/31

BOCA RATON, FL 33431 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: SCHULMAN, MICHAEL D
Address: 21800 OXNARD ST., SUITE 750
City-St-Zip: WOODLAND HILLS, CA 91367 US

Title: TREA

 Name:
 BROWNRIGG, AMY

 Address:
 4 POWDERMILL ROAD

 City-St-Zip:
 HAVERHILL, MA 01830 US

Title: SEC

 Name:
 EASTMAN, KRISTEN

 Address:
 5357 KILBOURNE DRIVE

 City-St-Zip:
 LYNDHURST, OH 44124 US

Title: DIR

Name: FERNALD, JOLEEN R Address: 14 MIDDLEBROOK RD City-St-Zip: DOVER, NH 03820 US

Title: DIR

Name: HESS, ESTIE

Address: 540 WEST KNOLL DR., #3 City-St-Zip: WEST HOLLYWOOD, CA 90048 US

Title: DIR

Name: KOTRBA, AIMEE Address: 602 GLENWYTH

City-St-Zip: BRIGHTON, MI 48116 US

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: MICHAEL D. SCHULMAN PRES 02/18/2010