

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005206

FILED
Mar 08, 2011
Secretary of State

Entity Name: CHILDHOOD ANXIETY NETWORK INC

Current Principal Place of Business:

19 SEPTEMBER DR
GREENLAND, NH 03840 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2207
DOVER, NH 038212207 US

New Mailing Address:

PO BOX 582
GREENLAND, NH 03840 US

FEI Number: 65-0946164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVER, NATALIE
3020 NW 23RD CT.
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

KOVAC, LISA
421 HILLCREST DR.
OVIEDO, FL 32765 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: LISA KOVAC

03/08/2011

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

03/08/2011

Electronic Signature of Signing Officer or Director

Date