2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069343

Entity Name: CHILDREN'S HEALTHCARE RESEARCH, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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927 45TH STREET 5205 GREENWOOD AVENUE SUITE 205 SUITE251 WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407

Current Mailing Address: New Mailing Address:

927 45TH STREET 5205 GREENWOOD AVENUE SUITE 205 SUITE251 WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407

FEI Number: 52-2367869 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:

KLEIN, STUART B ESQ. 2801 PGA BLVD. SUITE 110 PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition STIEBEL-CHIN, GRETA DR. STIEBEL-CHIN, GRETA C DR Name: Name: 927 45TH STREET #205 Address: 5205 GREENWOOD AVENUE Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33407

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GRETA STIEBEL-CHIN MD D 04/20/2009