

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003292

Entity Name: PREECLAMPSIA FOUNDATION, INC.

Current Principal Place of Business:

6767 N. WICKHAM RD., STE 400
MELBOURNE, FL 32940

Current Mailing Address:

6767 N WICKHAM ROAD, SUITE 400
MELBOURNE, FL 32940

FEI Number: 91-2073087

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TSIGAS, ELENI Z
6767 N WICKHAM ROAD, SUITE 400
MELBOURNE, FL 32940 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

Officer/Director Detail :

Title PRESIDENT
Name RIELLY-GAUVIN, KATHERINE
Address 939 SHERBORNE CT.
City-State-Zip: LIBERTYVILLE IL 60048

Title TREASURER
Name RIELLY-GAUVIN, KATHERINE
Address 939 SHERBORNE CT
City-State-Zip: LIBERTYVILLE IL 60048

Title SECRETARY
Name MAGUIRE, KATHY
Address 1403 N. MAIN ST
City-State-Zip: AUBURN IN 46706

Title DIRECTOR
Name TSIGAS, ELENI
Address 1020 WORTHINGTON SPRING DRIVE
City-State-Zip: MELBOURNE FL 32940

Title VP
Name FRAZER, BETH
Address 7500 WATERVALE DRIVE
City-State-Zip: NASHVILLE TN 37221

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: ELENI TSIGAS

EXECUTIVE DIRECTOR

03/18/2014

Electronic Signature of Signing Officer/Director Detail

Date