

2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005324

Entity Name: BRIGHT PINK NFP, INC.**Current Principal Place of Business:**670 N. CLARK ST.
SUITE 2
CHICAGO, IL 60654**Current Mailing Address:**670 N. CLARK ST.
SUITE 2
CHICAGO, IL 60654**FEI Number:** 51-0619889**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AVNER, BRETT
18020 VIA BELLAMARE LANE
MIROMAR LAKES, FL 33913 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:** BRETT AVNER

03/20/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name AVNER, BRETT PH.D
Address 600 N DEARBORN APT 1612
City-State-Zip: CHICAGO IL 60654

Title PRESIDENT, DIRECTOR, SECRETARY
Name AVNER, LINDSAY
Address 670 N. CLARK ST., SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR
Name MALKOFF, KURT PH.D
Address 2 EASTON OVAL SUITE 450
City-State-Zip: COLUMBUS OH 43219

Title TREASURER
Name RALSTON, KATHLEEN
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR
Name FREIVOGEL, MARY MS, GCC
Address 8200 E. BELLEVIEW AVE.
#200E
City-State-Zip: DENVER CO 80111

Title DIRECTOR
Name SLABY, MICHAEL
Address 55 E. ERIE STREET
APT. 4801
City-State-Zip: CHICAGO IL 60611

Title DIRECTOR
Name RODARMEL, JOSHUA
Address 20512 CRESCENT BAY
SUITE 108
City-State-Zip: LAKE FOREST CA 92630

Title DIRECTOR
Name TONEY, JAMES
Address 2038 BAY STREET
UNIT 1
City-State-Zip: LOS ANGELES CA 90028

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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: LINDSAY AVNER

PRESIDENT

03/20/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	HILSON, JOAN
Address	4281 OLMSTEAD ROAD
City-State-Zip:	NEW ALBANY OH 43054