

**2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000002569

**Entity Name:** TREGOED, INC.**Current Principal Place of Business:**116 VILLAGE BLVD SUITE 300  
PRINCETON, NJ 08540**Current Mailing Address:**116 VILLAGE BLVD SUITE 300  
PRINCETON, NJ 08540**FEI Number: 13-3740564****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLACKBURN, KATHRYN  
3868 ORANGE LAKE DR  
ORLANDO, FL 32817 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	P
Name	BLACKBURN, KATHRYN
Address	3868 ORANGE LAKE BLVD
City-State-Zip:	ORLANDO FL 32817

Title	BOARD MEMBER
Name	BALDWIN, WILLIAM
Address	116 VILLAGE BLVD SUITE 300
City-State-Zip:	PRINCETON NJ 08540

Title	BOARD MEMBER
Name	GALLINA, MICHAEL
Address	2785 CHALFORD CIR NW
City-State-Zip:	NORTH CANTON OH 44720

Title	V
Name	RICHETTI, CYNTHIA
Address	1305 WINNERS CUP CIR
City-State-Zip:	ST. CHARLES IL 60174

Title	BOARD MEMBER
Name	CURAN-HAYS, MICHAEL
Address	345 BEVERLY RD
City-State-Zip:	CAMP HILL PA 17011

Title	BOARD MEMBER
Name	CHRISTOPHER, MANNO
Address	2 ACADEMY DR. BCSSSD
City-State-Zip:	WESTAMPTON NJ 08060

*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: KATHRYN BLACKBURN****EXECUTIVE DIRECTOR****01/06/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date