No. <b>C 96469</b>		Due no later than Oct 31, 2006		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  MULTIPLE SCLEROSIS FOUNDATION, INC.  THOMAS L DAVIS  6350 N ANDREWS AVE  FT LAUDERDALE FL 33309		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE							
	mes and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	ERIC SCHENCK		5900 PARRETTA DRIVE	KANSAS CITY	MO	USA	64120
SECRETARY	DR. TRACI SEIDMAN		7800 WEST OAKLAND PARK BLVD. SUITE 102	SUNRISE	FL	USA	33351
DIRECTOR	DR. WILLIAM MUNDY		5905 SLATER STREET	MERRIEM	KS	USA	66202-2839
DIRECTOR	CHARLES EADER		4 WILDFLOWER LANE	BEDMINSTER	NJ	USA	07921-2010
DIRECTOR	JOHN BLACKSTOCK		1365 TIMOTHY RIDGE	SAINT CHARLES	MO	USA	63304-3435
DIRECTOR	GREGORY STEIN		495 BEACHSIDE DRIVE	WESTERVILLE	OH	USA	43081
DIRECTOR	MICHAEL AUSTIN		201 EAST WASHINGTON STREET	PHOENIX	ΑZ	USA	85004-2343
DIRECTOR	WILLIAM M	SHEEHAN	BANK OF AMERICA SEARS TOWER	CHICAGO	IL	USA	60606
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
FLORIDA C 96469		Signature: Alan Segaloff		Date: 08/08/2006			
		Name (type or print): Alan Segaloff		Title: Assistant Secretary			
Processed 08/08/2006		* Electronically provided signatures are accepted as original signatures.					