2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 846308

FILED Apr 06, 2006 Secretary of State

Entity Name: SAVE THE CHILDREN FEDERATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
54 WILTC WESTPO	N RD RT, CT 06880				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
54 WILTO	ROLYN MARKS N RD RT, CT 06880	3			
FEI Number	r: 06-0726487	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1200 S. Pl	PORATION SYS INE ISLAND RC TION, FL 33324)AD			
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Fitle: Name: Nddress: City-St-Zip:	P () MACCORMACK, 95 NORTH ST EASTON, CT 06		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Nddress: City-St-Zip:	T () BARROW-KLEIN 2475 VIRGINIA / WASHINGTON,	AVE., NW #824	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Nddress:			Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip:	WILLIAMSON-H 203 DAVENPOR NEW CANAAN, (D () DALY, ROBERT 10877 WILSHIR	IUGHES, ANDREA RT RIDGE ROAD CT 06840 Delete EE BLVD., SUITE 610	Name: Address:	() Change () Addition () Change () Addition	
Name: Address: City-St-Zip: Fitle: Name: Address:	WILLIAMSON-H 203 DAVENPOR NEW CANAAN, (D () DALY, ROBERT 10877 WILSHIR LOS ANGELES, D () GEIER, PHILIP	UGHES, ANDREA RT RIDGE ROAD CT 06840 Delete RE BLVD., SUITE 610 CA 09924 Delete REET, 15TH FLOOR	Name: Address: City-St-Zip: Title: Name: Address:	• • • • • • • • • • • • • • • • • • • •	

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREA WILLIAMSON-HUGHES S 04/06/2006