

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001374

FILED
Jan 12, 2009
Secretary of State

Entity Name: CHINESE CHILDREN CHARITIES INC.

Current Principal Place of Business:

6920 SOUTH HOLLY CIRCLE
CENTENNIAL, CO 80112

New Principal Place of Business:

Current Mailing Address:

1180 SPRING CENTRE S, BLVD.
SUITE 114
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 84-1208720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMONS, KATHRYN M
1180 SPRING CENTRE S. BLVD
SUITE 114
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: RADY, PAUL
Address: 4 MOCKINGBIRD LANE
City-St-Zip: ENGLEWOOD, CO 80113

Title: VC () Delete
Name: PONZIO, CRAIG
Address: 156 ELK CROSSING LANE
City-St-Zip: EVERGREEN, CO 80439

Title: D () Delete
Name: GRAHAM, JERRY
Address: 4195 STONE MINOR HTS
City-St-Zip: COLORADO SPRINGS, CO 80906

Title: D () Delete
Name: LANSING, PETER
Address: 6315 E. TUFT AVE.
City-St-Zip: CHERRY HILL VILLAGE, CO 80111

Title: PD () Delete
Name: NIE, LILY
Address: 10293 E CRESTRIDGE LN
City-St-Zip: ENGLEWOOD, CO 80111

Title: VP () Delete
Name: ZHONG, JOSHUA
Address: 10293 E CRESTRIDGE LANE
City-St-Zip: ENGLEWOOD, CO 80111

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOSHUA ZHONG

VP

01/12/2009

Electronic Signature of Signing Officer or Director

_____ Date