

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003709

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** CHILDREN FIRST - AMERICA'S CHARITIES, INC.

**Current Principal Place of Business:**

14150 NEWBROOK DRIVE SUITE 110  
CHANTILLY, VA 20151

**New Principal Place of Business:**

**Current Mailing Address:**

14150 NEWBROOK DRIVE SUITE 110  
CHANTILLY, VA 20151

**New Mailing Address:**

FEI Number: 30-0186795

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: PCEO  
Name: DELFIN, STEVE  
Address: 14150 NEWBROOK DRIVE SUITE 110  
City-St-Zip: CHANTILLY, VA 20151

Title: D  
Name: EVANS, PATRICIA  
Address: 14150 NEWBROOK DRIVE SUITE 110  
City-St-Zip: CHANTILLY, VA 20151

Title: T  
Name: TOURE, RAUDALL N  
Address: 14150 NEWBROOK DRIVE SUITE 110  
City-St-Zip: CHANTILLY, VA 20151

Title: S  
Name: HALLER, STACY PAGOS  
Address: 14150 NEWBROOK DRIVE SUITE 110  
City-St-Zip: CHANTILLY, VA 20151

Title: C  
Name: KROLOFF, GEORGE  
Address: 14150 NEWBROOK DRIVE SUITE 110  
City-St-Zip: CHANTILLY, VA 20151

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: STEVE DELFIN

PCEO

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date