

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000241

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: PINELLAS ADVOCATES FOR CHILDREN AND FAMILIES, INC.

**Current Principal Place of Business:**

C/O VIKKI YATES  
9509 118TH LANE NORTH  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

C/O VIKKI YATES  
9509 118TH LANE NORTH  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 75-3206942      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BOHEN, BETTY  
6818 STONE THROW CIRCLE  
#12104  
ST. PETERSBURG, FL 33710 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: CH      ( ) Delete  
Name: CARRIE, SHARON  
Address: 2469 ENTERPRISE ROAD  
City-St-Zip: CLEARWATER, FL 33763

Title: VCH      ( ) Delete  
Name: BOHEN, BETTY  
Address: 6818 STONE THROW CIRCLE #12104  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: T      ( ) Delete  
Name: YATES, VIKKI  
Address: 9509 118TH LANE N  
City-St-Zip: SEMINOLE, FL 33772

Title: S      ( ) Delete  
Name: ELLIS, JAMILLER  
Address: 10600 4TH ST. NORTH - APT 406  
City-St-Zip: ST. PETERSBURG, FL 33716

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CH      (X) Change ( ) Addition  
Name: CARRIE, SHARON  
Address: 10601 BELCHER ROAD SOUTH  
City-St-Zip: LARGO, FL 33777

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

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

Title: S      (X) Change ( ) Addition  
Name: ELLIS, JAMILLER  
Address: 11401 DR. MLK, JR. ST N # 1801  
City-St-Zip: ST. PETERSBURG, FL 33716

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: VICTORIA LYNN YATES

T

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date