

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006503

FILED
Jun 18, 2009
Secretary of State

Entity Name: THE ECKLEY FAMILY CHILDREN'S FOUNDATION, INC.

Current Principal Place of Business:

1038 CHATHAM PINES CIRCLE
#210
WINTER SPRINGS, FL 32708

New Principal Place of Business:

8971 S HOLLYBROOK BLVD
#104
PEMBROKE PINES, FL 33025

Current Mailing Address:

1038 CHATHAM PINES CIRCLE
#210
WINTER SPRINGS, FL 32708

New Mailing Address:

8971 S HOLLYBROOK BLVD
#104
PEMBROKE PINES, FL 33025

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ECKLEY, PAUL
8971 S. HOLLYBROOK BLVD., #104
PEMBROKE PINES, FL 33025 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: P () Delete
Name: ECKLEY, SHERE
Address: 100 BENT TREE DR., #227
City-St-Zip: DAYTONA BCH, FL 32114

Title: V () Delete
Name: ECKLEY, PAUL
Address: 8971 S HOLLYBROOK BLVD #104
City-St-Zip: PEMBROKE PINES, FL 33025

Title: S () Delete
Name: UNDERWOOD, CYNTHIA
Address: 100 WINNERS CIR. DR., #102
City-St-Zip: DAYTONA BCH, FL 32114

Title: T () Delete
Name: SCOTT-WILCOX, JULIA
Address: 120 WINNERS CIR. DR., #102
City-St-Zip: DAYTONA BCH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ECKLEY, SHERE
Address: 8971 S HOLLYBROOK BLVD
City-St-Zip: PEMBROKE PINES, FL 33025

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

Title: S (X) Change () Addition
Name: UNDERWOOD, CYNTHIA
Address: 120 WINNERS CIR. DR. #102
City-St-Zip: DAYTONA BCH, FL 32114

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

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: PAUL ECKLEY

VP

06/18/2009

Electronic Signature of Signing Officer or Director

_____ Date