

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006503

FILED
Aug 20, 2011
Secretary of State

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

Current Principal Place of Business:

8971 S HOLLYBROOK BLVD
#104
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

8971 S HOLLYBROOK BLVD
#104
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 30-0576250 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

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
Name: ECKLEY, SHERE
Address: 8971 S HOLLYBROOK BLVD
City-St-Zip: PEMBROKE PINES, FL 33025

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

Title: S
Name: RESSLER, MARIE
Address: 6720 ARTUR STREET
City-St-Zip: HOLLYWOOD, FL 33024

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

Title: V
Name: PATRIZIO, ELENA
Address: 14364 SW 48TH LANE
City-St-Zip: MIAMI, FL 33175

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: SHERE LYN ECKLEY

P

08/20/2011

Electronic Signature of Signing Officer or Director

_____ Date