

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 20, 2005
Secretary of State**

DOCUMENT# N34749

Entity Name: CHILDREN'S CASE MANAGEMENT ORGANIZATION, INC.

Current Principal Place of Business:

1720 E TIFFANY DR
STE 101
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

1720 E TIFFANY DR
STE 101
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 65-0166352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWINDLER, JULIE
1720 E TIFFANY DR.
STE. 101
WEST PALM BEACH, FL 33407 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: VPD () Delete
Name: GOLDSTEIN, HARRIET
Address: 336 PENNINGTON COURT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: PD () Delete
Name: BELL, BETTY
Address: 467 CAPISTRANO DR.
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MD () Delete
Name: DONTN, BERNARD
Address: 2560 RCA BEND, STE 108
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: TD () Delete
Name: PALMER, EZEKIEL
Address: 5702 WHEATLY CT
City-St-Zip: BOYNTON BEACH, FL 33436

Title: SD () Delete
Name: SCOTT, RITA
Address: 5606 56TH WAY
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MD () Delete
Name: NAVARRO, DANIEL
Address: 3510 TAM O'SHANTER LANE
City-St-Zip: BOCA RATON, FL 33431

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
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: MALONE, JUANITA
Address: 2524 STONEGATE DR
City-St-Zip: WELLINGTON, FL 33409

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JULIE SWINDLER

ED

01/20/2005

Electronic Signature of Signing Officer or Director

Date