2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# N93000005806

Entity Name: THE CHILDREN'S PLACE AT HOME SAFE FOUNDATION, INC.

Current Principal Place of Business:

2309 PONCE DE LEON AVENUE
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

2309 PONCE DE LEON BLVD.
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 65-0462950 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OLSHANSKY, HOWARD S
2309 PONCE DE LEON AVE
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

ROONEY, THOMAS J
2309 PONCE DE LEON AVE
WEST PALM BEACH, FL 33407 US

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: THOMAS J ROONEY 04/28/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RAMPELL, RICHARD
Address: 122 N. COUNTY RD.
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: MALFITANO, JAYNE
Address: 2323 ARECA PALM ROAD
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete
Name: ROONEY, PATRICK J SR
Address: 1111 N CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D ( ) Delete
Name: PICOW, ROBERT
Address: 7534 ISLA VERDE WAY
City-St-Zip: DELRAY BEACH, FL 33446

Title: D ( ) Delete
Name: DON, STEPHANIE
Address: 17837 FIELDBROOK CIRCLE W
City-St-Zip: BOCA RATON, FL 33496

Title: P ( ) Delete
Name: BERNSTEIN, STEVE
Address: 5900 BROKEN SOUND PKWY NW
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: CUNNINGHAM, P. RODNEY
Address: 1450 NW 1ST AVENUE
City-St-Zip: BOCA RATON, FL 33432

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

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

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: THOMAS J ROONEY CEO 04/28/2005
Electronic Signature of Signing Officer or Director Date