

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002741

FILED
Apr 26, 2008
Secretary of State

Entity Name: CHILDREN ARE OUR FUTURE INC.

Current Principal Place of Business:

W.S. STEVEN ALTERNATIVE SCHOOL
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1602
QUINCY, FL 32353

New Mailing Address:

FEI Number: 59-3256305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, SHERRIE D
217 W. CLARK STREET
QUINCY, FL 32351 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: PED () Delete
Name: TAYLOR, SHERRIE
Address: 217 W. CLARK
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: STRUGAN, ENESTINE
Address: P. O. BOX 1602
City-St-Zip: QUINCY, FL 32353

Title: D () Delete
Name: OJO, MATTHEW A
Address: 2961 FOXCROFT DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

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:

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: SHERRIE TAYLOR

PED

04/26/2008

Electronic Signature of Signing Officer or Director

Date