2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000002741

1. Entity Name

CHILDREN ARE OUR FUTURE INC.



FILED Mar 26, 2003 8:00 am Secretary of State

03-26-2003 90169 024 ****61.25

						000 W1 185							
62 LONNIE CLARK ROAD 62 I				Mailing Address 62 LONNIE CLARK ROAD DUINCY FL 32351				1 (1861)/61 616 10	III 81811 88111 88111 I		1 11 0 11 1 3 511 3 1	001 31 0 1 3 00 1	
2. Principal Place of Business 3. Ma				Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State				ty & State		_	4. FEI Number 59-3256305			Applied For Not Applicable			
Zip Country			Zi	p	ntry	try 5. Certificate of St			stus Desired \$8.75 Additiona			1	
6. Name and Address of Current Register				ed Agent				7. Name and Address of New Registered Agent					
	or manual		triogistor	od Agein		Name		7. Name and Add	iess of New Ne	giatered A	Jeni		┨
Taylor, Sherrie d 1906 Karen lane					Street Address (P.O. Box Number is Not Acceptable)							-	
TALLAHASSEE FL 32304										<u></u>	7]
						City				FL	Zip Cod	e	
		ubmits this statement f	or the purp	ose of changing its	registere	d office or regis	sterec	d agent, or both, in	the State of Flor	ida. I am fa	miliar with,	and accept	1
the obligat	tions of registere	d agent.											
CIONIATINO													}
SIGNATURE		rinted name of registered agen	t and title if app	olicable. (NOTE	: Registered	Agent signature requi	uired wh	hen reinstating)		DATE			
			···T					··					4
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State					
10.		OFFICERS AND D	IRECTORS		11.		ΔΓ	 DDITIONS/CHANGE	e TO OECIOED	S AND DIDE	CTORC IN	110	4
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NAME	TAYLOR, SH	ERRIE		□ Delete	NAME						Li Change	☐ Addition	2
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CITY-ST-ZIP	QUINCY FL (32351			CITY-	ST-ZIP							18
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NAME	STARGAN, M				NAME						_		١
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NAME	BAKER, MAR				NAME								
STREET ADDRESS	631 S. STEW				•	T ADDRESS]
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		formation supplied with	h this filing	does not quality by	the even	antion stated in S	Secti	ion 119.07(3)(i), Flo	rida Statutes, I f	urther certifi	that the ir	formation	1

2. I needy certify that the information supplied with this filing does not qualify prictie 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 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 thistee empowered to execute this eport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATUREDIRED

3 25/03