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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P36308**
Corporation Name

CHRISTIAN FOUNDATION FOR CHILDREN AND AGING, INC ORPORATED

Principal Place of Business	Mailing Address
ELWOOD AVE. CITY KS 66103-3719	ONE ELWOOD AVE. KANSAS CITY KS 66103-3719 US

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country 25

2a. Mailing Address 26
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

3. Date Incorporated or Qualifed: 11/07/1991
4. FEI Number: 43-1243999 ☐ Applied For ☐ Not Applicable
5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

DE LISSER, ELIZABETH ANN
9337 W. SAMPLE RD., SUITE 204
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
CD HENTZEN, BERNARD A 9619 LYNNDALE WICHITA KS 67209	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D HENTZEN, BERNARD A 9619 LYNNDALE WICHITA, KS 67209	☒ Change ☐ Addition
D PEARCE, CATHERINE N 409 W. 116TH ST KANSAS CITY MO 64145	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
D REV. BEAT, JEROME 2007 N. ARKANSAS WICHITA KS 67203	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	CD REV. BEAT, JEROME 2007 N ARKANSAS WICHITA, KS 67203	☒ Change ☐ Addition
P HENTZEN, ROBERT K 624 E. 97TH STREET KANSAS CITY MO 64131	☐ DELETE	4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
S QUIROGA, CATHERINE N 10338 LEE BLVD. LEAWOOD KS 66206	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
T HENTZEN, PAUL K. 8 E. 127 TERR KANSAS CITY MO 64145	☒ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	TD MSG. BAUER, HENRY 6425 WOODSON KANSAS CITY, MO 64133	☐ Change ☒ Addition

CR2E037 (11/98)

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1/4/99 913 384 6500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #