2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2004
Secretary of State

DOCUMENT# 703423

Entity Name: THE CHILDREN'S HOME, INC.

Current Principal Place of Business:

10909 MEMORIAL HWY
TAMPA, FL 336152599 US

New Principal Place of Business:

Current Mailing Address:

10909 MEMORIAL HWY
TAMPA, FL 336152599 US

New Mailing Address:

P. O. BOX 262229
TAMPA, FL 336852229 US

FEI Number: 59-0696284 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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:	SD	( ) Delete
Name:	ADAMS, CHERYL	
Address:	4942 ST. CROIX DRIVE	
City-St-Zip:	TAMPA, FL 33629	
Title:	P	( ) Delete
Name:	GOLD, SHARON A	
Address:	713 SOUTH OREGON AVENUE	
City-St-Zip:	TAMPA, FL 33606	
Title:	VPD	( ) Delete
Name:	NORRIS, RANDY	
Address:	1439 KENSINGTON WOODS DRIVE	
City-St-Zip:	LUTZ, FL 33549	
Title:	VPD	( ) Delete
Name:	NEWMAN, MERIDETH	
Address:	3102 BEACH DR	
City-St-Zip:	TAMPA, FL 33629	
Title:	D	( ) Delete
Name:	BOHANNAN, PATTY	
Address:	4501 BROOKWOOD DR	
City-St-Zip:	TAMPA, FL 33629	
Title:	TD	( ) Delete
Name:	HARDING, LINDA	
Address:	201 E KENNEDY BLVD STE 1200	
City-St-Zip:	TAMPA, FL 33602	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	HARDING, LINDA S	
Address:	8520 POYDRAS LANE	
City-St-Zip:	TAMPA, FL 33635	
Title:	VPD	(X) Change ( ) Addition
Name:	ALBERS, GREG	
Address:	672 SNUG ISLAND	
City-St-Zip:	CLEARWATER, FL 33767	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	DOLAN, MARTHA C	
Address:	5308 PINE ROCKLANDS AVE	
City-St-Zip:	LITHIA, FL 33547	
Title:	TD	(X) Change ( ) Addition
Name:	LAWRENCE, CYNTHIA K	
Address:	2 EAGLE LANE	
City-St-Zip:	PALM HARBOR, FL 34683	

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: CYNTHIA K LAWRENCE TD 01/05/2004

Electronic Signature of Signing Officer or Director — Date