

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000515

FILED  
Apr 06, 2004  
Secretary of State

**Entity Name:** FLORIDA COALITION FOR CHILDREN FOUNDATION, INC.

**Current Principal Place of Business:**

864 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

864 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

**FEI Number:** 59-3619798

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CUSICK, MICHAEL  
864 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: PD ( ) Delete  
Name: YOUNG, GEORGE  
Address: 2629 MITCHAM  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VD ( ) Delete  
Name: CARMICHEL, ALEX  
Address: 51 MAIN STREET  
City-St-Zip: ENTERPRISE, FL 32725

Title: DS ( ) Delete  
Name: BUXBAUM, PAUL  
Address: 45 WESTWOOD TERRACE N.  
City-St-Zip: ST. PETERSBURG, FL 32710

Title: DT ( ) Delete  
Name: KATZ, SHELLEY  
Address: 605 NE 1ST STE H  
City-St-Zip: GAINESVILLE, FL 32601

**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:

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: MICHAEL D. CUSICK

ED

04/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date