2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703423

FILED Feb 10, 2005 Secretary of State

Entity Name: THE CHILDREN'S HOME, INC.

Current Principal Place of Business: New Principal Place of Business: 10909 MEMORIAL HWY TAMPA, FL 336152599 US **Current Mailing Address: 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: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ADAMS, CHERYL Name: Name: 4942 ST. CROIX DRIVE Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: () Delete Title: (X) Change () Addition HARDING, LINDA S Name: HARDING, LINDA S Name: Address: 8520 POYDRAS LANE Address: 13577 FEATHER SOUND DRIVE SUITE 400 City-St-Zip: TAMPA, FL 33635 City-St-Zip: CLEARWATER, FL 33762 Title: VPD () Delete Title: CEO (X) Change () Addition ALBERS, GREG VENEMAN, GERARD Name: Name: 9111 BRINDLEWOOD DRIVE Address: 672 SNUG ISLAND Address: City-St-Zip: CLEARWATER, FL 33767 City-St-Zip: ODESSA, FL 33556 Title: VPD () Delete Title: CEO (X) Change () Addition Name: NEWMAN, MERIDETH Name: BOWER, HAROLD 3102 BEACH DR Address: Address: 3704 KINGSFORD PLACE City-St-Zip: TAMPA, FL 33629 City-St-Zip: VALRECO, FL 33594 Title: (X) Delete Title: () Change () Addition DOLAN, MARTHA C Name: Name: 5308 PINE ROCKLANDS AVE Address: Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: Title: () Delete Title: () Change () Addition LAWRENCE, CYNTHIA K Name: Name: Address: 2 EAGLE LANE Address: PALM HARBOR, FL 34683 City-St-Zip: 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: HAROLD BOWER CFO 02/10/2005