

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011004

FILED
Mar 19, 2008
Secretary of State

Entity Name: THE CHILDREN'S HOME PROPERTIES, INC.

Current Principal Place of Business:

10909 MEMORIAL HIGHWAY
TAMPA, FL 336152599

New Principal Place of Business:

Current Mailing Address:

P O BOX 262229
TAMPA, FL 33685

New Mailing Address:

FEI Number: 20-0037992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, BRUCE H
101 E. KENNEDY BOULEVARD
SUITE 2800
TAMPA, FL 33602 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: CHR () Delete
Name: ALBERS, GREG MR.
Address: 15500 LIGHTWAVE DRIVE, STE. 100
City-St-Zip: CLEARWATER, FL 33760

Title: SEC () Delete
Name: O'NEIL, CHERI M MRS
Address: 4830 W KENNEDY BLVD #450
City-St-Zip: TAMPA, FL 33609

Title: CEO () Delete
Name: VENEMAN, GERARD
Address: 9111 BRINDLEWOOD DRIVE
City-St-Zip: ODESSA, FL 33556

Title: CFO () Delete
Name: LATORTUE, REYNALD F MR
Address: 9719 YESHUA WAY
City-St-Zip: TAMPA, FL 33618

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 exemption stated in Chapter 119, 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: REYNALD LATORTUE

MR

03/19/2008

Electronic Signature of Signing Officer or Director

Date