2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702446

Entity Name: CHILDREN FIRST, INC.

Current Principal Place of Business:

1723 NORTH ORANGE AVENUE

SARASOTA, FL 34234

Current Mailing Address:

1723 NORTH ORANGE AVENUE SARASOTA. FL 34234 US

FEI Number: 59-0968249 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TAVILL, PHILIP 1723 N. ORANGE AVE. SARASOTA, FL 34234 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

FILED Jan 23, 2013

Secretary of State

CC4052988977

Officer/Director Detail :

Title DIRECTOR Title CHAIRMAN

RUTSTEIN, JO Name Name JONES, LESLIE A

50 CENTRAL AVENUE, SUITE 110 7623 ALISTER MCKENZIE DRIVE Address Address

City-State-Zip: SARASOTA FL 34230 SARASOTA FL 34236 City-State-Zip:

Title **TREASURER** Title DIRECTOR

Name SHAPIRO, DAVID Name HEITBRINK, NOLA J

Address 308 COCOANUT AVENUE Address 1918 HARBOURSIDE DRIVE #904 SARASOTA FL 34236 City-State-Zip: City-State-Zip: LONGBOAT KEY FL 34228

Title DIRECTOR Title **DIRECTOR**

Name BELL, JEFFERY BENSON, BARBARA G Name

Address 2071 RINGLING BLVD. Address 2894 NOBLE AVENUE

City-State-Zip: SARASOTA FL 34236 SARASOTA FL 34234 City-State-Zip:

Title VC: Title DIRECTOR

LEACH, BROCK Name BEAN, JOHN Name

5315 HIDDEN HARBOR ROAD Address 4957 PEREGRINE POINT WAY Address

City-State-Zip: SARASOTA FL 34242 SARASOTA FL 34231 City-State-Zip:

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I hereby 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 all other like empowered.

SIGNATURE: JENNIFER OUREDNIK

OFFICER

01/23/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Address

5679 EASTWIND DRIVE

DIRECTOR Title Title DIRECTOR

Name HALLINGER, CAROL Name MAXHEIM, ELENOR

3240 LAKE POINT BLVD. #202 Address 2377 GULF OF MEXICO DRIVE #2E1 Address

City-State-Zip: SARASOTA FL 34228 City-State-Zip: SARASOTA FL 34231

Title **OFFICER** Title SECRETARY

Name OUREDNICK, JENNIFER Name RAY, LACY Address 1725 NORTH ORANGE AVE.

City-State-Zip: SARASOTA FL 34234 City-State-Zip: SARASOTA FL 34233