2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001388

Entity Name: CHILDREN BEYOND OUR BORDERS, INC.

FILED Jan 31, 2017 Secretary of State CC2799229844

Current Principal Place of Business:

2624 ROBERT TRENT JONES

APT 625

ORLANDO, FL 32835

Current Mailing Address:

P.O. BOX 568411 ORLANDO, FL 32856

FEI Number: 20-8370884 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORTEGA, ANDREA 2624 ROBERT TRENT JONES APT 625 ORLANDO, FL 32835 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:

Date Electronic Signature of Registered Agent

Title

Officer/Director Detail:

CEO. EXECUTIVE DIRECTOR Title **OFFICER** Title

ORTEGA, ANDREA C Name Name CASTANO, GINA M

2624 ROBERT TRENT JONES 137 RANGELINE WOODS COVE Address Address

APT 625

City-State-Zip: LONGWOOD FL 32750 ORLANDO FL 32835 City-State-Zip:

PRESIDENT Title TREASURER Name LIPKIN, JOHN

Name MARIA, GRILLO C 45 CREEKSIDE LANE #147 Address

45 CREEKSIDE LANE #147 Address City-State-Zip: MALVERN PA 19355

City-State-Zip: MALVERN PA 19355

Title **OFFICER** Title **SECRETARY**

ALVAREZ. DANIEL Name Name ARTURO, PAOLA A

Address 3931 SW 146 AVENUE Address 7651 GATE PARKWAY APT 701 City-State-Zip: MIRAMAR FL 33027

JACKSONVILLE FL 32256 City-State-Zip:

Title **OFFICER** Title **OFFICER** WILLIAMS, BRENDAN Name

MONTOYA-WILLIAMS, DIANA Name Address 1245 SW 9TH ROAD UNIT 301 1245 SW 9TH ROAD UNIT 301 Address

GAINESVILLE FL 32601 City-State-Zip: GAINESVILLE FL 32601 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.

01/31/2017 SIGNATURE: ANDREA ORTEGA **EXECUTIVE DIRECTOR**

Officer/Director Detail Continued:

Title OFFICER Title OFFICER

Name TORRES, NATALIA Name HOYLE, ALLISON
Address 2516 N KEDZIE BLVD APT 3E Address 2196 COVENTRY RD

City-State-Zip: CHICAGO IL 60647 City-State-Zip: UPPER ARLINGTON OH 43221

Title OFFICER Title OFFICER

Name LEYVA, MARCUS Name CORREA, KEVIN

Address 108 EAST 4TH STREET APT. 12 Address 253 NE 2ND ST APT 2102

City-State-Zip: NEW YORK NY 10003 City-State-Zip: MIAMI FL 33132