

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000001388

**FILED**  
**Jan 14, 2014**  
**Secretary of State**  
**CC6248253690**

**Entity Name:** CHILDREN BEYOND OUR BORDERS, INC.

**Current Principal Place of Business:**

5472 FITNESS CIRCLE  
APT 205  
ORLANDO, FL 32839

**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  
5472 FITNESS CIRCLE  
APT 205  
ORLANDO, FL 32839 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ORTEGA, ANDREA C  
Address        5472 FITNESS CIRCLE  
                  APT 205  
City-State-Zip: ORLANDO FL 32839

Title            VP  
Name            CASTANO, GINA M  
Address        137 RANGELINE WOODS COVE  
City-State-Zip: LONGWOOD FL 32750

Title            TREASURER  
Name            MARIA, GRILLO C  
Address        118 TRIPHAMMER RD  
City-State-Zip: ITHACA NY 14850

Title            OFFICER  
Name            LIPKIN, JOHN  
Address        106 VALENTINE PLACE APT. 682  
City-State-Zip: ITHACA NY 14850

Title            DIRECTOR  
Name            GUERRERO, LISA A  
Address        491 RACQUET CLUB RD  
City-State-Zip: WESTON FL 33326

Title            OFFICER  
Name            ARTURO, PAOLA A  
Address        7651 GATE PARKWAY APT 701  
City-State-Zip: JACKSONVILLE FL 32256

Title            OFFICER  
Name            ALVAREZ, DANIEL  
Address        3931 SW 146 AVENUE  
City-State-Zip: MIRAMAR FL 33027

Title            DIRECTOR  
Name            ARMAS, DAVID  
Address        12404 JEFFERSON CIRCLE NORTH  
City-State-Zip: CHAMBLEE GA 30341

*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:** ANDREA ORTEGA

**PRESIDENT**

**01/14/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date