

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000011577

**Entity Name:** TREE OF LIFE CHILDREN'S FOUNDATION, INC.

**Current Principal Place of Business:**

530 AVELLINO ISLE CIRCLE  
# 7101  
NAPLES, FL 34119

**Current Mailing Address:**

POST OFFICE BOX 110567  
NAPLES, FL 34108 US

**FEI Number: 26-1512538**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

O'BRIEN, KEVIN  
530 AVELLINO ISLE CIRCLE  
#7101  
NAPLES, FL 34119 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 P  
Name O'BRIEN, KEVIN  
Address POST OFFICE BOX 110567  
City-State-Zip: NAPLES FL 34108

Title VP  
Name O'BRIEN, DANIELLE J  
Address 530 AVELLINO ISLES CIRCLE #7101  
City-State-Zip: NAPLES FL 34119

Title VP  
Name O'BRIEN, KELLY J  
Address 530 AVELLINO ISLES CIRCLE #7101  
City-State-Zip: NAPLES FL 34119

*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: KEVIN O'BRIEN**

**PRESIDENT**

**01/28/2013**

Electronic Signature of Signing Officer/Director Detail

Date