

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000009553

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC5393541262**

**Entity Name:** THE ORPHAN CHILDREN'S FUND, INC

**Current Principal Place of Business:**

GROVE WAY  
215  
DELRAY BEACH, FL 33444

**Current Mailing Address:**

GROVE WAY  
215  
DELRAY BEACH, FL 33444

**FEI Number:** 46-0625682

**Certificate of Status Desired:** Yes

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

RAJEN, NAIDOO  
GROVE WAY  
215  
DELRAY BEACH, FL 33444 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 NAIDOO, RAJEN  
Address 215 GROVE WAY  
City-State-Zip: DELRAY BEACH FL 33444

Title OFFICER  
Name NAIDOO, SOPHIE T MISS  
Address GROVE WAY  
215  
City-State-Zip: DELRAY BEACH FL 33444

Title OFFICER  
Name NAIDOO, SASKIA L MISS  
Address GROVE WAY  
215  
City-State-Zip: DELRAY BEACH FL 33444

*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:** RAJEN NAIDOO

**PRESIDENT**

**04/30/2015**

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

\_\_\_\_\_  
Date