

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008034

Entity Name: CHILDREN'S HEALTH AND SAFETY NETWORK, INC.

Current Principal Place of Business:

13245 ATLANTIC BLVD.
SUITE #354
JACKSONVILLE, FL 32225

Current Mailing Address:

13245 ATLANTIC BLVD.
SUITE #354
JACKSONVILLE, FL 32225

FEI Number: 27-3168296

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FREZZA, LOUIS J
13065 BIRCH BARK CT. N.
JACKSONVILLE, FL 32225 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 PD
Name SIEBOLD, RICHARD K
Address 13065 BIRCH BARK CT. N.
City-State-Zip: JACKSONVILLE FL 32246

Title SEC.
Name CONDON, NICHOLAS
Address 1953 SPOONBILL ST.
City-State-Zip: JACKSONVILLE FL 32224

Title BM
Name DIPRATO, JOHN
Address 5340 N. FEDRERAL HIGHWAY
City-State-Zip: LIGHTHOUSE POINT FL 33324

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: NICHOLAS CONDON JR

SECRETARY

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date