

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34749

**Entity Name:** CHILDREN'S CASE MANAGEMENT ORGANIZATION, INC.

**FILED**  
**Jan 29, 2021**  
**Secretary of State**  
**6118259464CC**

**Current Principal Place of Business:**

3333 FOREST HILL BLVD  
2ND FLOOR  
WEST PALM BEACH, FL 33406

**Current Mailing Address:**

3333 FOREST HILL BLVD  
2ND FLOOR  
WEST PALM BEACH, FL 33406 US

**FEI Number: 65-0166352**

**Certificate of Status Desired: Yes**

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

SWINDLER, JULIE  
3333 FOREST HILL BLVD  
2ND FLOOR  
WEST PALM BEACH, FL 33406 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            SISK FOMAN, DENA ESQ.  
Address        525 OKEECHOBEE BLVD.  
                 SUITE 1700  
City-State-Zip: WEST PALM BEACH FL 33401

Title            CEO  
Name            SWINDLER, JULIE  
Address        3333 FOREST HILL BLVD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            PAST PRESIDENT  
Name            MERCADER, RAUL  
Address        2056 VISTA PARKWAY  
                 SUITE 350  
City-State-Zip: WEST PALM BEACH FL 33411

Title            TREASURER  
Name            NUNEZ, RONNY A.  
Address        525 OKEECHOBEE BLVD.  
                 SUITE 1680  
City-State-Zip: WEST PALM BEACH FL 33401

Title            FIRST, VP  
Name            MCQUINN, BARBARA  
Address        3300 FOREST HILL BLVD.  
                 SUITE C-316  
City-State-Zip: WEST PALM BEACH FL 33406

Title            SECOND, VP  
Name            GUILLAUME, BYRNES N. ESQ.  
Address        14800 APRIL DR.  
City-State-Zip: LOXAHATCHEE GROVES FL 33470

Title            SECRETARY  
Name            SPRINGER, JIM  
Address        11454 162ND PLACE NORTH  
City-State-Zip: JUPITER FL 33478

*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: JULIE SWINDLER**

**CEO**

**01/29/2021**

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

\_\_\_\_\_  
Date