

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005806

Entity Name: THE CHILDREN'S PLACE AT HOME SAFE FOUNDATION, INC.**Current Principal Place of Business:**2840 SIXTH AVENUE SOUTH
LAKE WORTH, FL 33461**Current Mailing Address:**2840 SIXTH AVENUE SOUTH
LAKE WORTH, FL 33461 US**FEI Number: 65-0462950****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**LADIKA, MATTHEW
2840 SIXTH AVENUE SOUTH
LAKE WORTH, FL 33461 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	PRES
Name	COPENHAVER, CHERIE
Address	3077 WATERSIDE CIRCLE
City-State-Zip:	BOYNTON BEACH FL 33435

Title	SEC
Name	PIERSON, GLORIA D.
Address	10013 COUNTRY BROOK ROAD
City-State-Zip:	BOCA RATON FL 33428

Title	D
Name	LAYMAN, DAVID M
Address	777 S FLAGLER DR #301E
City-State-Zip:	WEST PALM BEACH FL 33401

Title	VP
Name	NELSON, ALICE
Address	1406 14TH WAY
City-State-Zip:	WEST PALM BEACH FL 33407

Title	TRES
Name	PEREZ, VAL
Address	2130 CENTREPARK DRIVE WEST
City-State-Zip:	WEST PALM BEACH FL 33409

Title	PAST
Name	NICHOLS, MIKE
Address	961 BUTTERNUT TERRACE
City-State-Zip:	BOCA RATON FL 33486

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: CHERIE COPENHAVER**PRESIDENT, BOARD OF
DIRECTORS****04/16/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date