

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 579672

1. Entity Name
A CHILD'S PLACE, INC.



FILED
Jul 11, 2008 08:00 AM
Secretary of State

Principal Place of Business
6200 S.W ARCHER ROAD
GAINESVILLE, FL 32608 US

Mailing Address
6200 SW ARCHER ROAD
GAINESVILLE, FL 32608 US



07022008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1872592

Applied For
Not Applied

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FOUST, AMANDA J.
6200 SW ARCHER ROAD
GAINESVILLE, FL 32608

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FOUST, AMANDA J
STREET ADDRESS	13015 NW 93RD LANE
CITY-ST-ZIP	ALACHUA, FL 32615
TITLE	VP
NAME	FOUST, V. JAMES
STREET ADDRESS	13065 NW 93RD LANE
CITY-ST-ZIP	ALACHUA, FL 32615
TITLE	S
NAME	FOUST HERRING, MELISSA
STREET ADDRESS	1024 TULLAMORE DRIVE
CITY-ST-ZIP	WESLEY CHAPEL, FL 33543
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000954225
07/11/08-80004-020 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

Amanda J. Foust

7/09/08