

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 704778

FILED  
May 11, 2002 8:00 AM  
Secretary of State

Entity Name: FLORIDA COALITION FOR CHILDREN, INC.

**Current Principal Place of Business:**

313 N MONROE ST #2  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

313 N MONROE ST #2  
TALLAHASSEE, FL 32301

**New Mailing Address:**

FEI Number: 59-6152174      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MOORE, SUSAN A  
2722 WALERFORD GLEN CT  
TALLAHASSEE, FL 32312

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

MOORE, SUSAN A  
2722 WATERFORD GLEN CT  
TALLAHASSEE, FL 32312

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

05/11/2002

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BONCHARD, ROGER  
Address: FL. SHEIFFS YOUTH RANCHES  
City-St-Zip: BOYS RANCH, FL 32064

Title: DV ( ) Delete  
Name: BROWN, ROB  
Address: 2354 UNIVERSITY BLVD N  
City-St-Zip: JACKSONVILLE, FL 32211

Title: DS ( ) Delete  
Name: BRUSZER, MARGIE  
Address: 8125 LAUREL HILL RD  
City-St-Zip: ORLANDO, FL 32818

Title: DT ( ) Delete  
Name: COX, CAHRILE  
Address: 7748 SW 95TH TERR  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: BOUCHARD, ROGER  
Address: FL. SHERIFFS YOUTH RANCHES  
City-St-Zip: BOYS RANCH, FL 32064

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROGER BOUCHARD

Electronic Signature of Signing Officer or Director

DP

05/11/2002

Date