

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708985

FILED
Jan 25, 2012
Secretary of State

Entity Name: CHILDHOOD DEVELOPMENT SERVICES, INC.

Current Principal Place of Business:

1601 N E 25TH AVENUE
900
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

1601 N E 25TH AVENUE
900
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 59-1262700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROMUND, CURT
1601 NE 25TH AVE
900
OCALA, FL 34470 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CEO
Name: BROMUND, CURT
Address: 1601 NE 25TH AVE., SUITE 900
City-St-Zip: Ocala, FL 34470 US

Title: CAO
Name: MCCOLLISTER, DAVID
Address: 1601 NE 25TH AVE, SUITE 900
City-St-Zip: Ocala, FL 34470 US

Title: T
Name: BRANSON, RUSTY
Address: 1632 E SILVER SPRINGS BLVD
City-St-Zip: Ocala, FL 34470 US

Title: P
Name: HIATT, CHARLES
Address: 2069 SW 37TH STREET ROAD
City-St-Zip: Ocala, FL 34471 US

Title: VP
Name: POWERS, JEREMY
Address: 110 NW 1ST AVE., 5TH FLOOR
City-St-Zip: Ocala, FL 34475 US

Title: S
Name: LOMBARDO, ADAM
Address: 4822 SE 33RD STREET
City-St-Zip: Ocala, FL 34480 US

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: CURT BROMUND

CEO

01/25/2012

Electronic Signature of Signing Officer or Director

Date