LE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **744564** **(6)**

Corporation Name

COMMUNITY CHILDREN'S COMMITTEE INC.

Principal Place of Business	Mailing Address
2528 W. COLONIAL DRIVE ORLANDO FL 32804	2528 W. COLONIAL DRIVE ORLANDO FL 32804

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/12/1978
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1856823 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 7523 ALOMA AV	26 7523 ALOMA AV
Suite, Apt. #, etc. 22 STE 108	Suite, Apt. #, etc. 27 STE 108
City & State 23 WINTER PARK FL	City & State 28 WINTER PARK FL
Zip / Country 24 32792 / 25 USA	Zip / Country 29 32792 / 30 USA

5. Certificate of Status Desired ☑ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

JACKSON, DARRELL L.
111 S. BUTLER DRIVE
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name: JACKSON, DARRELL L
82 Street Address (P.O. Box Number is Not Acceptable): 7910 SHOALS DR APT B
83
84 City: ORLANDO FL 85 Zip Code: 32817

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD ☑ Change ☐ Addition
NAME	JACKSON, DARRELL	1.2 NAME	JACKSON, DARRELL
STREET ADDRESS	111 S. BUTLER DRIVE	1.3 STREET ADDRESS	7910 SHOALS DR APT 13
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO, FL 32817
TITLE	VD	2.1 TITLE	VD ☑ Change ☐ Addition
NAME	JACKSON, RICKY	2.2 NAME	ROBINSON, TERRY L
STREET ADDRESS	111 S. BUTLER DRIVE	2.3 STREET ADDRESS	1190 S. RARITAN ST. APT 1
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	DENVER CO 80223
TITLE	TD	3.1 TITLE	TD ☑ Change ☐ Addition
NAME	BRUNING, RICHARD	3.2 NAME	TAYLOR RICHARD A
STREET ADDRESS	31456 LAKE DRIVE	3.3 STREET ADDRESS	106 RABUN CT
CITY-ST-ZIP	EUSTIS FL	3.4 CITY-ST-ZIP	SANFORD FL 32773
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DARRELL JACKSON 4/26/95 407 657-0401
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

000488