

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747926

FILED
Feb 16, 2007
Secretary of State

Entity Name: THE CHILDREN'S PLACE AT HOME SAFE, INC.

Current Principal Place of Business:

2840 SIXTH AVENUE SOUTH
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

2840 SIXTH AVENUE SOUTH
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 59-1935485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROONEY, THOMAS J
2840 SIXTH AVENUE SOUTH
LAKE WORTH, FL 33461 US

Name and Address of New 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: MATTHEW LADIKA

02/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: BERNSTEIN, STEVE
Address: 5900 BROKEN SOUND PKEY NW
City-St-Zip: BOCA RATON, FL 33487

Title: P () Delete
Name: LAYMAN, DAVID
Address: 777 SOUTH FLAGLER DRIVE SUITE 310 EAST
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: MARCADIS, ELIZABETH
Address: 7805 S FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL

Title: PP () Delete
Name: KELLOGG, WARD
Address: 2235 SW 11TH PLACE
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Delete
Name: MONROE, JAMES
Address: 12600 NW 65TH DRIVE
City-St-Zip: PARKLAND, FL 33076

Title: D () Delete
Name: MULHALL, III JOHN
Address: 2600 N MILITARY TRL, 4TH FL
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BERNSTEIN, STEVE
Address: 5900 BROKEN SOUND PKEY NW
City-St-Zip: BOCA RATON, FL 33487

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

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

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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 Chapter 119, 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: DAVID LAYMAN

P

02/16/2007

Electronic Signature of Signing Officer or Director

Date