

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755354

FILED  
Apr 22, 2008  
Secretary of State

**Entity Name:** THE CHILDREN'S ADVOCACY CENTER OF VOLUSIA & FLAGLER COUNTIES, INC.

**Current Principal Place of Business:**

1011 WEST INTERNATIONAL SPEEDWAY BLVD.  
DAYTONA BCH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

1011 WEST INTERNATIONAL SPEEDWAY BLVD.  
DAYTONA BCH, FL 32114 US

**New Mailing Address:**

**FEI Number:** 59-2065914

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARRY, MARYANN  
344 SOUTH BEACH STREET  
DAYTONA BEACH, FL 32114 US

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

BARRY, MARYANN  
1011 WEST INTERNATIONAL SPEEDWAY BLVD.  
DAYTONA BEACH, FL 32114 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: MARYANN BARRY

04/22/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPE (X) Delete  
Name: BARKER, DIANE  
Address: 5967 BOGGS FORD RD  
City-St-Zip: PORT ORANGE, FL 32127

Title: PPD (X) Delete  
Name: ELAM, MICHAEL  
Address: 1333 OSPREY NEST LANE  
City-St-Zip: PORT ORANGE, FL 32128

Title: DP ( ) Delete  
Name: PARR, DAWN  
Address: 890 JOHN ANDERSON DR  
City-St-Zip: ORMOND BEACH, FL 32176

Title: DT ( ) Delete  
Name: SCHAUFERT, RICH  
Address: 546 RIO VISTA AVE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: 1VPD ( ) Delete  
Name: HALL, SUSIE  
Address: 3889 SOUTH ATLANTIC AVE  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: DS ( ) Delete  
Name: LONG, AUBREY DR  
Address: 5441 FREDRICK LAKE DR  
City-St-Zip: PORT ORANGE, FL 32128

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

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

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

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

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 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: KAREN HORZEPA

COO

04/22/2008

Electronic Signature of Signing Officer or Director

Date