

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759175

FILED
Feb 01, 2005
Secretary of State

Entity Name: CHILD PROTECTION CENTER, INC.

Current Principal Place of Business:

1750 17TH STREET, BLDG. L
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

1750 17TH STREET, BLDG. L
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 59-2113850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NANCY FLANAGAN
5514 AZURE WAY
SARASOTA, FL 34242 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: TD () Delete
Name: ROBINSON, FREDRICK A FR.
Address: 222 S. PALM AVENUE
City-St-Zip: SARASOTA, FL 34236 US

Title: VPD () Delete
Name: PITCHFORD, MALCOM
Address: P.O. BOX 49948
City-St-Zip: SARASOTA, FL 34230 US

Title: P () Delete
Name: FLANAGAN, NANCY
Address: 5514 AZURE WAY
City-St-Zip: SARASOTA, FL 34242 US

Title: SD () Delete
Name: RUSS, VALARIE
Address: 1477 10TH STREET
City-St-Zip: SARASOTA, FL 34236 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: FLANAGAN, NANCY
Address: 5514 AZURE WAY
City-St-Zip: SARASOTA, FL 34242 US

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: NANCY FLANAGAN

PRES

02/01/2005

Electronic Signature of Signing Officer or Director

Date