2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

DOCUMENT# 759175

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:

STEVE ELLIS
1800 SECOND STREET
SUITE 888
SARASOTA, FL 34236 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:	BASTEK, WILLIAM	
Address:	P.O. BOX 4097	
City-St-Zip:	SARASOTA, FL 34230 US	
Title:	VPD	( ) Delete
Name:	CLAMAGE, GEORGINA	
Address:	1801 MAIN STREET	
City-St-Zip:	SARASOTA, FL 34236 US	
Title:	SD	( ) Delete
Name:	FLANAGAN, NANCY	
Address:	5514 AZURE WAY	
City-St-Zip:	SARASOTA, FL 34242 US	
Title:	PD	( ) Delete
Name:	ELLIS, STEVE	
Address:	1800 SECOND STREET, SUITE 888	
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:	SD	(X) Change ( ) Addition
Name:	MCCONNELL, TRISH	
Address:	1741 MAIN STREET	
City-St-Zip:	SARASOTA, FL 34236 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 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: WILLIAM BASTEK TD 01/08/2007

Electronic Signature of Signing Officer or Director — Date