## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # 765551 Jun 20, 2000 8:00 am 1. Entity Name **Secretary of State** CHILDREN'S RIGHTS OF AMERICA, INC. 06-20-2000 90009 004 \*\*\*\*70.00 Principal Place of Business Mailing Address 500 SUGAR MILL ROAD 500 SUGAR MILL ROAD BLDG B. STE 160 BLDG B. STE 160 ATLANTA GA 30350 ATLANTA GA 30350-2865 2. Principal Place of Business 3. Mailing Address 1200 ABBRNATHY RO. BOX Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE - . . Suite City & State City & State 4. FEI Number Applied For 59-2261769 ALPHARETTA HTLANTA Not Applicable Żip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired 30328 30023-3581 Fee Required tulton HULTON --- 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PARSLEY, CAROL 11722 CURRIE LN. Zip Code City **LARGO FL 34644** 8. 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. 事がない さも on the arm with the fo SIGNATURE CONOR VETT 4-055 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CD Change ☐ Addition TITLE ☐ Delete TITLE voss. Jim NAME NAME STREET ADDRESS STREET ADDRESS 1729 FAIRFAX CITY-ST-ZIP CITY-ST-ZIP Barnhart Mo TITLE PD ☐ Delete TITLE ☐ Change Addition ROSENTHAL, KATHERYN NAME STREET ADDRESS STREET ADDRESS 8735 DUNWOODY PL #6 CITY-ST-ZIP-CITY-ST-ZIP ATLANTA-GA-30350~ イエ D Addition TITLE VTD Delete TITLE ☐ Change THELMA JONES 5100 STH ST. No. Bell. Sue NAME STREET ADDRESS 2906 WEBB BRIDGE ROAD STREET ADDRESS KENNETH CATY, FC 33709 CITY-ST-ZIP CITY-ST-ZIE alpharetta ga SD Delete TITLE ☐ Change Addition TITLE MARY E- YOSS 1729 FAIRFAX NAME OSTEEN, AUBREY NAME STREET ADDRESS STREET ADDRESS 1321 HEMINGWAY LANE CITY-ST-ZIP CITY-ST-ZIP BARNHART, MO ROSWELL GA ☐ Addition ☐ Change □ Delete TITLE TITLE ZANDER, CARL NAME NAME STREET ADDRESS STREET ADDRESS 2650 \$ 46TH ST., #102 CITY-ST-ZIP CITY-ST-ZIP PHOENIX AZ 85082 ☐ Addition TITLE □ Delete TITLE ☐ Change GIMON, ALEXANDER NAME NAME STREET ADDRESS 655 ULMERTON ROAD, STE 7-C STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LARGO FL 34641

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Date Date Dayling Phone #