2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770763

FILED Feb 04, 2008 Secretary of State

Entity Name: PALM BEACH COUNTY COALITION FOR CHILDREN, INC.

Current Principal Place of Business: New Principal Place of Business:

GIRLS & BOYS TOWN 3111 SOUTH DIXIE HIGHWAY, SUITE 200 WEST PALM BEACH, FL 33405

New Mailing Address: Current Mailing Address:

P O BOX 3592 WEST PALM BEACH, FL 334023592 US

FEI Number: 59-2422001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROWN GATTOZZI, KAREN 1109 SOUTH CONGRESS AVE US WEST PALM BEACH, FL 33406

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

RAASCH, ANDREA RAASCH, ANDREA Name: Name: 471 SPENCER DRIVE Address: 6416 MELALEUCA LANE Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: GREENACRES, FL 33463

Title: () Delete Title: () Change () Addition

NOAKOWSKI, EVA Name: Name: Address: 328 GREENBRIAR DRIVE Address: City-St-Zip: LAKE PARK, FL 33403 City-St-Zip:

Title: () Delete Title: V/D (X) Change () Addition VANWAGONER, MIKE SCHNEIDER, JENNIFER Name: Name: 16158 SOUTH MILITARY TRAIL Address: Address: 3333 FOREST HILL BLVD. City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: WEST PALM BEACH, FL 33406

Title: MR. () Delete Title: V/D (X) Change () Addition

Name: GIBSON, DANIEL Name: MELVIN, JENNIFER 7600 SOUTH DIXIE HWY Address: Address: 317 10TH STREET City-St-Zip: WEST PALM BEACH, FL 33445 City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Delete Title: () Change (X) Addition

HOLCOMB, JACK Name: Name: 810 DATURA STREET Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33401

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: JACK HOLCOMB T/D 02/04/2008