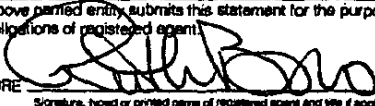
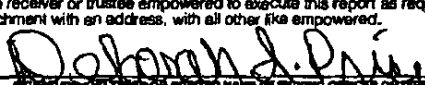


FILED
May 17, 2004 8:00 am
Secretary of State

04-26-2004 91009 019 ****70.00

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F03000004556					
1. Entity Name CHILDREN'S HOUSE INTERNATIONAL, INCORPORATED					
Principal Place of Business 600 THACKER AVENUE KISSIMMEE, FL 34741			Mailing Address PO BOX 1829 FERNDALE, WA 98248		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent BORO, RUTH 1852 SAILFISH COURT KISSIMMEE, FL 34744				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FLZip Code	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$81.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CLAXTON, TERI 1083 E. 4875 S. OGDEN, UT 84403 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SNARR, JEFF 1790 SUGARLOAF DR. SANDY, UT 84082 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S POPESCU, MARIANA 1488 E 8020 S SANDY, UT 840936849 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S POPESCU, DANIEL 1488 E 8020 S SANDY, UT 840936849 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPIVEY, RICK 3229 E. NUTREE DR. SALT LAKE CITY, UT 84121 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPIVEY, DONNA 3229 E. NUTREE DR. SALT LAKE CITY, UT 84121 ☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary to the Board Deborah S. Price 6204 Parkland Way Ferntdale wa 98248 ☒ Change ☒ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					
SIGNATURE:  4-21-04 360383-0023					