## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000005591

FILED Apr 08, 2005 Secretary of State

Entity Name: CHERISH OUR CHILDREN INTERNATIONAL INCORPORATED

| Current Principal Place of Business:        |  |                                   | New Principal Pl                            | New Principal Place of Business:             |  |
|---|--|-----------------------------------|---|--|--|
|   | ADBROOK<br>N, TX 77099   |                                   |   |  |  |
| Current Mailing Address:                    |  |                                   | New Mailing Add                             | New Mailing Address:                         |  |
| P.O. BOX !<br>HOUSTON                       | 540007<br>N, TX 77254  |                                   |   |  |  |
| FEI Number:                                 | 76-0393617   | FEI Number Applied For ( )        | FEI Number Not Applicable (                 | ) Certificate of Status Desired ( )          |  |
| Name and                                    | Address of (   | Current Registered Agent:         | Name and Addre                              | ss of New Registered Agent:                  |  |
|   | SLIE<br> 8 STREET<br>ON, FL 3331                                       | 7 US                              |   |  |  |
|   | named entity<br>of Florida.  | submits this statement for the pu | urpose of changing its regis                | stered office or registered agent, or both,  |  |
| SIGNATUF                                    | RE:  |                                   |   |  |  |
|   | Electro  | nic Signature of Registered Ager  | nt  | Date   |  |
| OFFICERS AND DIRECTORS:                     |  |                                   | ADDITIONS/CHA                               | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | KAMIN, JULI  | ) Delete<br>ROUGH CIRCLE<br>77055 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | SABBA, STEVI   | VAY, SUITE 707                    | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | PCEO (<br>GARRISON, JO<br>856 ROADSTO<br>BRIDGETON, I                  | WN RD                             | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>JOHNSON, CC<br>11718 CHADB<br>HOUSTON, TX                       | REAK                              | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ( ) Delete<br>BOROJEVICH, MARY<br>909 D AVENUE<br>CORONADO, CA 92118 |                                   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>HEISER, CARI<br>350 WOODLAI<br>BATAVIA, IL 6                    | ND HILLS RD                       | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

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: CONNIE JOHNSON CFO 04/08/2005