

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002938

FILED
Feb 06, 2006
Secretary of State

Entity Name: AMERICAN CULINARY FEDERATION CHEF & CHILD FOUNDATION, INC.

Current Principal Place of Business:

180 CENTER PLACE WAY
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

Current Mailing Address:

180 CENTER PLACE WAY
ST. AUGUSTINE, FL 32095

New Mailing Address:

FEI Number: 11-2951880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JANTSCH, DAWN D
180 CENTER PLACE WAY
ST. AUGUSTINE, FL 32095 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: C () Delete
Name: KRAFT, JOSEPH
Address: 180 CENTER PLACE WAY
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: DP () Delete
Name: PITZ, REIMUND
Address: 180 CENTER PLACE WAY
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: DS () Delete
Name: MIKESELL, ELIZABETH
Address: 180 CENTER PLACE WAY
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: DT () Delete
Name: KATZ, ELLIOT
Address: 180 CENTER PLACE WAY
City-St-Zip: ST. AUGUSTINE, FL 32095

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: KRAFT, JOSEPH
Address: 257 E. HURON ST. LC 521
City-St-Zip: CHICAGO, IL 60611

Title: D (X) Change () Addition
Name: MIKESELL, ELIZABETH
Address: 1515 W. CALLE GUADALAJALA
City-St-Zip: TUCSON, AZ 85757

Title: S (X) Change () Addition
Name: BLANCATO, VINCE
Address: 3912 RUDDER WAY
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: T (X) Change () Addition
Name: FINGERMAN, IRA
Address: 858 WEST ARMITAGE AVE #261
City-St-Zip: CHICAGO, IL 60614

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: DAWN JANTSCH

D

02/06/2006

Electronic Signature of Signing Officer or Director

_____ Date