2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2010
Secretary of State

DOCUMENT# F08000002576

Entity Name: CASEY FAMILY PROGRAMS, INC.

Current Principal Place of Business:

1300 DEXTER AVENUE NORTH
FLOOR 3
SEATTLE, WA 98109

New Principal Place of Business:

Current Mailing Address:

1300 DEXTER AVENUE NORTH
FLOOR 3
SEATTLE, WA 98109

New Mailing Address:

FEI Number: 91-0793881 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: T
Name: MILLS, DAVID
Address: 1300 DEXTER AVENUE NORTH, FLOOR 3
City-St-Zip: SEATTLE, WA 98109

Title: CD
Name: SEVERSON, GARY R
Address: 1300 DEXTER AVENUE NORTH, FLOOR 3
City-St-Zip: SEATTLE, WA 98109

Title: VCD
Name: POLIAK, JOAN B
Address: 1300 DEXTER AVENUE NORTH, FLOOR 3
City-St-Zip: SEATTLE, WA 98109

Title: PCEO
Name: BELL, WILLIAM C
Address: 1300 DEXTER AVENUE NORTH, FLOOR 3
City-St-Zip: SEATTLE, WA 98109

Title: SD
Name: TRANUMN, SHEILA EVANS
Address: 1300 DEXTER AVENUE NORTH, FLOOR 3
City-St-Zip: SEATTLE, WA 98109

Title: T
Name: MCDANIEL-LOWE, SHARON
Address: 1300 DEXTER AVENUE NORTH, FLOOR 3
City-St-Zip: SEATTLE, WA 98109

I hereby 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 all other like empowered.

SIGNATURE: ALEXANDRA MCKAY VP 04/20/2010

Electronic Signature of Signing Officer or Director — Date