

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002576

FILED  
Apr 18, 2011  
Secretary of State

**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:**

2001 EIGHTH AVENUE  
SUITE 2700  
SEATTLE, WA 98121

**Current Mailing Address:**

1300 DEXTER AVENUE NORTH  
FLOOR 3  
SEATTLE, WA 98109

**New Mailing Address:**

2001 EIGHTH AVENUE  
SUITE 2700  
SEATTLE, WA 98121

**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: 2001 EIGHTH AVENUE, SUITE 2700  
City-St-Zip: SEATTLE, WA 98121

Title: CD  
Name: SEVERSON, GARY R  
Address: 2001 EIGHTH AVENUE, SUITE 2700  
City-St-Zip: SEATTLE, WA 98121

Title: VCD  
Name: POLIAK, JOAN B  
Address: 2001 EIGHTH AVENUE, SUITE 2700  
City-St-Zip: SEATTLE, WA 98121

Title: PCEO  
Name: BELL, WILLIAM C  
Address: 2001 EIGHTH AVENUE, SUITE 2700  
City-St-Zip: SEATTLE, WA 98121

Title: SD  
Name: TRANUMN, SHEILA EVANS  
Address: 2001 EIGHTH AVENUE, SUITE 2700  
City-St-Zip: SEATTLE, WA 98121

Title: T  
Name: MCDANIEL-LOWE, SHARON  
Address: 2001 EIGHTH AVENUE, SUITE 2700  
City-St-Zip: SEATTLE, WA 98121

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

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date