

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000000912

1. Entity Name

CHILD WELFARE INSTITUTE, INC.

FILED

Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90226 039 ****61.25

Principal Place of Business

1349 W. PEACHTREE ST.
SUITE 900
ATLANTA GA 30309

Mailing Address

1349 W. PEACHTREE ST.
SUITE 900
ATLANTA GA 30309

2. Principal Place of Business

3950 Shackleford Road

Suite, Apt. #, etc.

Suite 175

City & State
Duluth, GA

Zip
30096

Country
Gwinnett

3. Mailing Address

3950 Shackleford Road

Suite, Apt. #, etc.

Suite 175

City & State
Duluth, GA

Zip
30096

Country
Gwinnett



DO NOT WRITE IN THIS SPACE

4. FEI Number
56-1392972

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLACK, JANET
2107 DELTA WAY
TALLAHASSEE FL 32303-4209

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WELSH, CATHERINE
1349 WEST PEACHTREE STREET NE
ATLANTA GA 30309 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HOLLAND, DEBORAH
2 GATEWAY CENTER
PITTSBURGH PA ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
YUEN, YUESEN
1979 SUTTER STREET
SAN FRANCISCO CA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
POWELL, NORMAN
521 LANCASTER AVE
RICHMOND KY 40475 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MORTON, THOMAS D
1349 W. PEACHTREE STREET, NE, STE 900
ATLANTA GA 30309 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Richard Calica
1707 N. Halsted
Chicago, IL 60614 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Chairperson ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Ralph Kelly
1025 Capital Center Drive
Frankfort, KY 40601 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
3950 Shackleford Road, Suite 175
Duluth, GA 30096

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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

Donald M. ...
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 14, 2002

Date

Daytime Phone #

CR2E037 (9/01)