

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G32149

FILED
Apr 16, 2012
Secretary of State

Entity Name: ALLEN CHILDREN CENTERS INC

Current Principal Place of Business:

1804 ST. JOHNS BLUFF ROAD
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

2201 RIVERSIDE AVE.
JACKSONVILLE, FL 32204 US

New Mailing Address:

FEI Number: 59-2286897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, BARBARA L
2201 RIVERSIDE AVE.
JACKSONVILLE, FL 32204 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: P
Name: ALLEN, BARBARA L
Address: 2201 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

Title: VS
Name: SANCHEZ, KAREM V
Address: 1804 ST. JOHNS BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 32246

Title: V
Name: OGBURN, WILLIAM R
Address: 2201 RIVERSIDE AVE.
City-St-Zip: JACKSONVILLE, FL 32204

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA L. ALLEN

PRES

04/16/2012

Electronic Signature of Signing Officer or Director

Date