

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003755

FILED
Apr 06, 2009
Secretary of State

Entity Name: GIVE KIDS SAFE SHELTER, INC.

Current Principal Place of Business:

400 W. EMMETT ST.
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 420596
KISSIMMEE, FL 347420596

New Mailing Address:

FEI Number: 59-3660444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CTEROUX, SANDRA
3760 MANTEO CIRCLE
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

GEROUX, SANDRA
3760 MANTEO CIRCLE
ORLANDO, FL 32837 US

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: SANDRA GEROUX

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: SEWELL, VALERIE
Address: 400 W EMMETT STREET
City-St-Zip: KISSIMMEE, FL 34741

Title: VC () Delete
Name: KENNEY, BARBARA
Address: 1215 SPRUCE AVE
City-St-Zip: ORLANDO, FL 32824

Title: T () Delete
Name: SUSAN, LYNN
Address: 4175 U.S.1, #102
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: LIZASUAIN, HECTOR
Address: 1 COURTHOUSE SE ST 100
City-St-Zip: KISSIMMEE, FL 34741

Title: S () Delete
Name: GEROUX, SANDRA
Address: 3760 MANTEO CIRCLE
City-St-Zip: ORLANDO, FL 32837

Title: VC () Delete
Name: TURNER, DONNA
Address: 2850 FLORIDA PLAZA BLVD
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: GEROUX, SANDRA
Address: 3760 MANTEO CIRCLE
City-St-Zip: ORLANDO, FL 32837

Title: T (X) Change () Addition
Name: TERRICO, GENE
Address: 4877 LAKE CECILE DRIVE
City-St-Zip: KISSIMMEE, FL 34746

Title: D (X) Change () Addition
Name: LIZASUAIN, HECTOR
Address: 3096 MICHIGAN AVE.
City-St-Zip: KISSIMMEE, FL 34744

Title: VC (X) Change () Addition
Name: ROWLAND, JAMIE
Address: 1646 COD STREET
City-St-Zip: ST. CLOUD, FL 34771

Title: VC (X) Change () Addition
Name: HERSTICH, JUDY
Address: 2755 OLD HICKORY TREE ROAD
City-St-Zip: ST. CLOUD, FL 34772

I hereby certify that the information supplied with this filing does not qualify 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: VALERIE SEWELL

C

04/06/2009

Electronic Signature of Signing Officer or Director

Date