2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2005
Secretary of State

DOCUMENT# N00000006883

Entity Name: FOSTER CHILDREN'S UNITED SOCIETY, INC.

Current Principal Place of Business:

18090 COLLINS AVE., #103
SUITE 103
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

18090 COLLINS AVE., #103
SUITE 103
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 65-1064051 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENT, MARQUETTE D
253 172ND STREET #218
SUNNY ISLES BEACH, FL 33160 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:	ED	( ) Delete
Name:	KENT, MARQUETTE D	
Address:	253 172ND STREET #218	
City-St-Zip:	SUNNY ISLES BEACH, FL 33160	
Title:	D	( ) Delete
Name:	RIEDEL, PETER J	
Address:	253 172ND STREET #218	
City-St-Zip:	SUNNY ISLES BEACH, FL 33160	
Title:	T	( ) Delete
Name:	KERBOVAC, JAMES F	
Address:	4643 HEEGE RD	
City-St-Zip:	ST LOUIS, MO 63134	
Title:	S	( ) Delete
Name:	WILLIS, MICHELLE	
Address:	8262 JANUARY STREET	
City-St-Zip:	ST LOUIS, MO 63134	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARQUETTE D. KENT ED 01/17/2005

Electronic Signature of Signing Officer or Director — Date