

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007231

FILED
May 01, 2008
Secretary of State

Entity Name: MY REFUGE CHILDREN'S SHELTER, INC.

Current Principal Place of Business:

2330 AURORA RD
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

PO BOX 362342
MELBOURNE, FL 329362342

New Mailing Address:

FEI Number: 59-3659008 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FRAHM, RICHARD H
2330 AURORA RD
MELBOURNE, FL 32935 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRAHM, RICHARD H
Address: P.O. BOX 362342
City-St-Zip: MELBOURNE, FL 32936

Title: TD () Delete
Name: FRAHM, CAROLINE O
Address: P.O. BOX 362342
City-St-Zip: MELBOURNE, FL 32936

Title: VD () Delete
Name: SAUER, LESTER
Address: P.O. BOX 362342
City-St-Zip: MELBOURNE, FL 32936

Title: D () Delete
Name: STINNETT, CRYSTAL
Address: P.O. BOX 362342
City-St-Zip: MELBOURNE, FL 32936

Title: D (X) Delete
Name: FRODGE, KIM
Address: P.O. BOX 362342
City-St-Zip: MELBOURNE, FL 32936

Title: D (X) Delete
Name: MOSELY, WENDY
Address: PO BOX 362342
City-St-Zip: MELBOURNE, FL 32936

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:

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 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: RICHARD H FRAHM

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date