

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007421

FILED
Apr 28, 2009
Secretary of State

Entity Name: CHILDREN'S CAMPAIGN, INC.

Current Principal Place of Business:

487-1 EAST TENNESSEE STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 1718
TALLAHASSEE, FL 323021718

New Mailing Address:

FEI Number: 31-1811747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROY, MILLER
487-1 EAST TENNESSEE STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: MASON, DEBBIE
Address: 528 NW 13TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: INMAN-JOHNSON, DOT
Address: 309 OFFICE PLAZA DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: PENNINGTON, ROCKIE
Address: 235 E. VIRGINIA STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: RODRIGUEZ, EDWIN A
Address: 2500 MERCHANTS ROW BLVD, STE. 173
City-St-Zip: TALLAHASSEE, FL 32302

Title: D () Delete
Name: SUTHERLAND, LINDA
Address: 600 COURTLAND STREET
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: ALEXIONOK, LINDA
Address: 1010 LOTHIAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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: ROY MILLER

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date