

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007845

FILED
Apr 24, 2007
Secretary of State

Entity Name: CHILDREN'S ARTISTIC DEVELOPMENT-A SPECIAL NEEDS ORGANIZATION, INC.

Current Principal Place of Business:

21 SUNDIAL CIRCLE
MARGATE, FL 33068

New Principal Place of Business:

7005 NW 11 STREET
MARGATE, FL 33063

Current Mailing Address:

21 SUNDIAL CIRCLE
MARGATE, FL 33068

New Mailing Address:

7005 NW 11 STREET
MARGATE, FL 33063

FEI Number: 65-1153045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MERIZZI, ELIZABETH
21 SUNDIAL CIRCLE
MARGATE, FL 33068 US

Name and Address of New Registered Agent:

MERIZZI, ELIZABETH
7005 NW 11 STREET
MARGATE, FL 33063 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: _____

04/24/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MERIZZI, ELIZABETH
Address: 21 SUNDIAL CIRCLE
City-St-Zip: MARGATE, FL 33068

Title: D () Delete
Name: JULIANO, MICHAEL R
Address: 21 SUNDIAL CIRCLE
City-St-Zip: MARGATE, FL 33068

Title: D () Delete
Name: FISHER, CARL E
Address: 8333 W. MCNAB RD., SUITE #127
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MERIZZI, ELIZABETH
Address: 7005 NW 11 STREET
City-St-Zip: MARGATE, FL 33063

Title: D (X) Change () Addition
Name: JULIANO, MICHAEL R
Address: 7005 NW 11 STREET
City-St-Zip: MARGATE, FL 33063

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: ELIZABETH MERIZZI

D

04/24/2007

Electronic Signature of Signing Officer or Director

Date