

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 23, 2007
Secretary of State**

DOCUMENT# N02000004976

Entity Name: CHEER MOMS INC.

Current Principal Place of Business:

1241 WINTERVILLE ST
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

1241 WINTERVILLE ST
DELTONA, FL 32725

New Mailing Address:

FEI Number: 04-3694588 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:

HOLLAND, LINDA L
1241 WINTERVILLE ST
DELTONA, FL 32725 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: VP () Delete
Name: ADESSA, MICHELE
Address: 1836 COROLLA CT
City-St-Zip: DELTONA, FL 32738

Title: S () Delete
Name: LONG, CHERYL
Address: 1365 10TH ST
City-St-Zip: ORANGE CITY, FL 32763

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: HOLLAND, LINDA
Address: 1241 WINTERVILLE ST
City-St-Zip: DELTONA, FL 32725

Title: MEM (X) Change () Addition
Name: ADESSA, MICHELE
Address: 1836 COROLL CT
City-St-Zip: DELTONA, FL 32738

Title: MEM () Change (X) Addition
Name: LONG, CHERYL
Address: 1365 10TH ST
City-St-Zip: ORANGE CITY, FL 32725

Title: ADV () Change (X) Addition
Name: HOLLAND, DARYL
Address: 1241 WINTERVILLE ST
City-St-Zip: DELTONA, FL 32725

Title: ADV () Change (X) Addition
Name: CRUZ, SHEILA
Address: 2687 LEAFY WAY
City-St-Zip: DELTONA, FL 32725

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: LINDA L HOLLAND

DIR

06/23/2007

Electronic Signature of Signing Officer or Director

Date