2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005960

FILED Mar 12, 2009 Secretary of State

Entity Name: CHILDREN'S ADVOCACY CENTER FOR OSCEOLA COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 1605 B JOHN YOUNG PARKWAY 1605 B JOHN YOUNG PARKWAY **SUITE 1611** SUITE 1611 KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 New Mailing Address: **Current Mailing Address:** 1605 B JOHN YOUNG PARKWAY 1605 B JOHN YOUNG PARKWAY SUITE 1611 **SUITE 1611** KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 US FEI Number: 30-0141916 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHUBA, JOY E CHUBA, JOY E CHILDREN'S ADVOCACY CENTER FOR OSCEOLA CHILDREN'S ADVOCACY CENTER FOR OSCEOLA 1605B JOHN YOUNG PARKWY 1605 B JOHN YOUNG PARKWAY, SUITE 1611 KISSIMMEE, FL 34741 US KISSIMMEE, FL 34741 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: 03/12/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition CHUBA, JOY E CHUBA, JOY E Name: Name: Address: 1605 B JOHN YOUNG PARKWAY Address: 1605 B JOHN YOUNG PARKWAY, SUITE 1611 KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: OWEN, PAUL Name: OWEN, PAUL Address: 1 COURTHOUSE SQUARE, SUITE 4700 Address: 2349 CHADWICK CIRCLE City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34746 US Title: () Delete Title: (X) Change () Addition NORWALK, DONALD NORWALK, DONALD Name: Name: 3365 WEST VINE STREET, SUITE 207 3365 WEST VINE STREET, SUITE 207 Address: Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741 US () Delete Title: Title: (X) Change () Addition DIGIACOMO, JÍM Name: DIGIACOMO, JIM Name: 817 BILL BECK BLVD 817 BILL BECK BLVD Address: Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744 US Title: () Delete Title: (X) Change () Addition CRUTCHFIELD, SUSAN CRUTCHFIELD, SUSAN Name: Name: 1502 B VILLAGE OAK LANE 1502 B VILLAGE OAK LANE Address: Address: KISSIMMEE, FL 34746 City-St-Zip: City-St-Zip: KISSIMMEE, FL 34746 US Title: () Delete Title: (X) Change () Addition HAWKINS, FRED GEROUX, SANDY Name: Name: Address: 3725 HICKORY TREE ROAD Address: 3760 MANTEO CIRCLE ORLANDO, FL 32837 US ST. CLOUD, FL 34772 City-St-Zip: 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: JOY CHUBA D 03/12/2009