2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# N02000007492

Entity Name: CHILDREN'S ANGEL NETWORK, INC.

Current Principal Place of Business:

24370 SANDPIPER ISLE WAY
205
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6216
FORT MYERS, FL 33911

New Mailing Address:

FEI Number: 22-3879629 **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:

VANBIBBER, LYNDA R
24370 SANDPIPER ISLE WAY
#205
BONITA SPRINGS, FL 34134 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:	PD	( ) Delete
Name:	VANBIBBER, LYNDA	
Address:	P.O. BOX 6216	
City-St-Zip:	FT. MYERS, FL 339116216	
Title:	SD	( ) Delete
Name:	MASCHMEIER, LORIE	
Address:	4190 COLONIAL BOULEVARD	
City-St-Zip:	FORT MYERS, FL 33907	
Title:	D	( ) Delete
Name:	JOHNSON, TANYA	
Address:	2235 NW 1ST AVE	
City-St-Zip:	CAPE CORAL, FL 33993	
Title:	VD	( ) Delete
Name:	MAYER, FRED	
Address:	3156 SIXTH AVENUE	
City-St-Zip:	ST.JAMES CITY, FL 33956	

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:	

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: LYNDA R. VANBIBBER PD 06/16/2009

Electronic Signature of Signing Officer or Director — Date