

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009497

FILED
May 15, 2008
Secretary of State

Entity Name: THE CHILDREN'S FOUNDATION OF LAKE COUNTY, INC.

Current Principal Place of Business:

1203 CHESTERFIELD COURT
EUSTIS, FL 32726 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1837
EUSTIS, FL 32727 US

New Mailing Address:

FEI Number: 42-1624405 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

SEMENTO, SHARRON
22 CYPRESS DRIVE
EUSTIS, FL 32726 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: VD () Delete
Name: HEILIGENTHAL, CINDI
Address: 19526 SPRING OAK DRIVE
City-St-Zip: EUSTIS, FL 32736

Title: D () Delete
Name: LEE, EMILY A
Address: 705 WASHINGTON AVENUE
City-St-Zip: EUSTIS, FL 32726

Title: SD () Delete
Name: GIDDENS, CANDI R
Address: 13241 GRAND TERRACE DRIVE
City-St-Zip: GRAND ISLAND, FL 32735

Title: PD () Delete
Name: THOMPSON, B.E.
Address: 1203 CHESTERFIELD COURT
City-St-Zip: EUSTIS, FL 32726

Title: TD () Delete
Name: SEMENTO, SHARRON
Address: 22 CYPRESS DRIVE
City-St-Zip: EUSTIS, FL 32726

Title: D () Delete
Name: NATHANSON, ED CHIEF
Address: 423 FENNELL BOULEVARD
City-St-Zip: LADY LAKE, FL 32159

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:

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: B.E. THOMPSON

PD

05/15/2008

Electronic Signature of Signing Officer or Director

Date