2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2009
Secretary of State

DOCUMENT# N02000009497

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:	
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 06/15/2009

Electronic Signature of Signing Officer or Director — Date