

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009950

FILED
Mar 26, 2004
Secretary of State**Entity Name:** CHILDREN'S SAFETY RESOURCE NETWORK, INC.**Current Principal Place of Business:**2203 N LOIS AVE STE 700
TAMPA, FL 33607**New Principal Place of Business:****Current Mailing Address:**2203 N LOIS AVE STE 700
TAMPA, FL 33607**New Mailing Address:****FEI Number:** 52-2390110**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SASSER, MARK D
2203 N. LOUISE AVE
SUITE 700
TAMPA, FL 33609 US**Name and Address of New Registered Agent:**SASSER, MARC D
2203 N. LOUISE AVE
SUITE 700
TAMPA, FL 33609 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: MARC D. SASSER

03/26/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SASSER, MARC D
Address: 2203 N LOIS AVE STE 700
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: PRICE, ELIZABETH
Address: 2203 N LOIS AVE STE 700
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: BRUNO, SUSAN
Address: 2203 N LOIS AVE STE 700
City-St-Zip: TAMPA, FL 33607

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARC D. SASSER

PRES

03/26/2004

Electronic Signature of Signing Officer or Director

Date