

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004303

FILED
Apr 22, 2004
Secretary of State**Entity Name:** CLOTHE THE CHILDREN, INC.**Current Principal Place of Business:**1142 HARRISON AVE
GULF BREEZE, FL 32563**New Principal Place of Business:****Current Mailing Address:**1142 HARRISON AVE
GULF BREEZE, FL 32563**New Mailing Address:****FEI Number:** 54-2110984**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COOGLE, SHARON
1142 HARRISON AVE
GULF BREEZE, FL 32563**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:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** MRS. () Change (X) Addition
Name: COOGLE, SHARON B PRESIDE
Address: 1142 HARRISON AVE.
City-St-Zip: GULF BREEZE, FL 32563 US**Title:** MR. () Change (X) Addition
Name: COOGLE, JOHN E VP
Address: 1142 HARRISON AVE.
City-St-Zip: GULF BREEZE, FL 32563 US**Title:** MRS. () Change (X) Addition
Name: COOGLE, LORIE L SEC/TRE
Address: 1166 HARRISON AVE.
City-St-Zip: GULF BREEZE, FL 32563 US

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: SHARON B. COOGLE

PRES

04/22/2004

Electronic Signature of Signing Officer or Director_____
Date