

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011029

FILED
Sep 01, 2009
Secretary of State

Entity Name: CHILDRENS HIMALAYAN FOUNDATION, INC.

Current Principal Place of Business:

922 CANCUN CT
THE VILLAGES, FL 32159

New Principal Place of Business:

Current Mailing Address:

922 CANCUN CT
THE VILLAGES, FL 32159

New Mailing Address:

FEI Number: 20-1883256 **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:

Name and Address of New Registered Agent:

HEALY, THOMAS
922 CANCUN CT
THE VILLAGES, FL 32159 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HEALY, MAURA
Address: 922 CANCUN CT
City-St-Zip: THE VILLAGES, FL 32159

Title: VD () Delete
Name: TANSEY, VONA
Address: 922 CANCUN CT
City-St-Zip: THE VILLAGES, FL 32159

Title: SD () Delete
Name: HEALY, THOMAS
Address: 922 CANCUN CT
City-St-Zip: THE VILLAGES, 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:

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: MAURA HEALY

PD

09/01/2009

Electronic Signature of Signing Officer or Director

Date