

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04583

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: STOP! CHILDRENS CANCER, INC.

## Current Principal Place of Business:

2632 NW 43RD ST.  
A108  
GAINESVILLE, FL 32606 US

## New Principal Place of Business:

## Current Mailing Address:

2632-A 108 NW 43RD ST.  
GAINESVILLE, FL 32606 US

## New Mailing Address:

FEI Number: 59-2624901      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FREEMAN, LAUREL J.  
2810 NORTHWEST 31ST TERRACE  
GAINESVILLE, FL 32605 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: D ( ) Delete  
Name: BARDON, MS. DORIS,  
Address: 1903 N.W. 36TH DR.  
City-St-Zip: GAINESVILLE, FL

Title: D ( ) Delete  
Name: HUTTO, JAY  
Address: 5931 NW 1ST PLACE  
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete  
Name: FREEMAN, MRS. LAUREL,  
Address: 2810 NW 31ST TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: FREEMAN, HOWARD,  
Address: 2810 NW 31ST. TERR.  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: NYE-ISLAM, MARILYN  
Address: 2411 NW 24TH TER  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: WHITE, GRACE  
Address: 10216 SW 49TH LANE  
City-St-Zip: GAINESVILLE, FL 32608

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ROSSI, W.J.,  
Address: 2700 A NW 43RD STREET  
City-St-Zip: GAINESVILLE, FL 32606

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 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: LAUREL FREEMAN

D

01/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date