

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004926

FILED
Mar 19, 2007
Secretary of State

Entity Name: ADVOCATING FOR KIDS, INC.

Current Principal Place of Business:

32776 NASHUA BLVD.
SORRENTO, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

POB 1847
MT. DORA, FL 327561847 US

New Mailing Address:

FEI Number: 20-2823876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARENAS, FRANK B MR.
1511 TAYLOR AVENUE
POB 600
COLEMAN, FL 33521 US

Name and Address of New Registered Agent:

ROLFSON, CALVIN N MR.
8014 ST. JAMES WAY
MOUNT DORA, FL 32757 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: CALVIN N. ROLFSON

03/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBERTSON, LALENYA J MRS.
Address: 36638 NASHUA BLVD.
City-St-Zip: SORRENTO, FL 32776 US

Title: VP () Delete
Name: JONES-THAYER, TERRI MRS.
Address: 1201 NE 77TH STREET
City-St-Zip: OCALA, FL 34479 US

Title: SECY () Delete
Name: SWADE, VERA K DR.
Address: 771 N. LAFAYETTE WAY
City-St-Zip: INVERNESS, FL 34453 US

Title: T () Delete
Name: ROBERTSON, LALENYA J MRS.
Address: 36638 NASHUA BLVD.
City-St-Zip: SORRENTO, FL 32776 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: BM () Change (X) Addition
Name: ROLFSON, CALVIN N MR.
Address: 8014 ST. JAMES WAY
City-St-Zip: MT. DORA, FL 32757

Title: BM () Change (X) Addition
Name: CARPENTER, SUSAN J MS.
Address: 21675 SW 102ST. ROAD
City-St-Zip: DUNNELLON, FL 34431

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: LALENYA J. ROBERTSON

PRES

03/19/2007

Electronic Signature of Signing Officer or Director

Date