

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006447

FILED  
Apr 25, 2007  
Secretary of State

**Entity Name:** CONCERNED PARENTS OF AUTISTIC CHILDREN, INC.

**Current Principal Place of Business:**

13014 WATERFORD RUN DRIVE  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

13014 WATERFORD RUN DRIVE  
RIVERVIEW, FL 33569

**New Mailing Address:**

**FEI Number:** 20-3084281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KAMLEITER, MARK ESQ  
2509 FIRST AVENUE SOUTH  
ST PETERSBURG, FL 33712 US

**Name and Address of New Registered Agent:**

OWENS LAW GROUP, P.A  
811-B CYPRESS VILLAGE BLVD  
RUSKIN, FL 33573 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: MR. J. OWENS

04/25/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MOURSI, HOUSAM D.O.  
Address: 4510 GENTRICE DR  
City-St-Zip: VALRICO, FL 33594

Title: VPD ( ) Delete  
Name: SUE-WAH-SING, CECIL B M.D.  
Address: 13014 WATERFORD RUN DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: SD ( ) Delete  
Name: ITURBIDES, MARISOL  
Address: 2826 TIMBERWAY LANE  
City-St-Zip: BRANDON, FL 33511

Title: TD ( ) Delete  
Name: AYALA, HECTOR  
Address: 1502 LAKEHURTS WAY  
City-St-Zip: BRANDON, FL 33511

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: RADULOVIC, TANYA  
Address: 12026 PENNFIELD PLACE  
City-St-Zip: RIVERVIEW, FL 33569

Title: TD (X) Change ( ) Addition  
Name: MOONEY-CROUCH, KAREN  
Address: 14112 CREEK RUN DRIVE  
City-St-Zip: RIVERVIEW, FL 33569

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: CECIL SUE-WAH-SING

VPD

04/25/2007

Electronic Signature of Signing Officer or Director

Date