2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006447

FILED Jul 09, 2008 Secretary of State

Entity Name: CONCERNED PARENTS OF AUTISTIC CHILDREN, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	FERFORD RUN DRIVE V, FL 33569		
Current Mailing Address:		New Mailing Address:	
	FERFORD RUN DRIVE V, FL 33569		
FEI Number: 20-3084281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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:
	AW GROUP, P.A RESS VILLAGE BLVD L 33573 US		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing its registered	office or registered agent, or both,
SIGNATUR	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete MOURSI, HOUSAM D.O. 4510 GENTRICE DR VALRICO, FL 33594	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	VPD () Delete SUE-WAH-SING, CECIL B M.D. 13014 WATERFORD RUN DR RIVERVIEW, FL 33569	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	SD () Delete RADULOVIC, TANYA 12026 PENNFIELD PLACE RIVERVIEW, FL 33569	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	TD () Delete MOONEY-CROUCH, KAREN 14112 CREEK RUN DRIVE RIVERVIEW, FL 33569	Title: (Name: Address: City-St-Zip:) Change ()Addition

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 VP 07/09/2008