

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007366

FILED
Feb 28, 2009
Secretary of State

Entity Name: CHILDRENS BENEFITS FOUNDATION, INC.

Current Principal Place of Business:

4424 TRAILWOOD DRIVE
COHUTTA, GA 30710 US

New Principal Place of Business:

Current Mailing Address:

4424 TRAILWOOD DRIVE
COHUTTA, GA 30710 US

New Mailing Address:

FEI Number: 25-7465609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

O'NEAL, PATRICK L
5805 FLOY DRIVE
LAKELAND, FL 33810 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: BLACKWELL, ERMAN K
Address: 4424 TRAILWOOD DRIVE
City-St-Zip: COHUTTA, GA 30710 US

Title: D () Delete
Name: MASSEY, DOUGLAS R
Address: 7901 WINDSONG DR.
City-St-Zip: TRUSVILLE, AL 35173

Title: D () Delete
Name: ARMSTRONG, ROBERT A
Address: 637 S. MAIN ST.
City-St-Zip: MADISON, GA 30650

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: ERMAN K. BLACKWELL

D

02/28/2009

Electronic Signature of Signing Officer or Director

Date