

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008111

FILED
Feb 16, 2010
Secretary of State

Entity Name: CHILDREN'S VOLUNTEER HEALTH NETWORK, INC.

Current Principal Place of Business:

605 N HWY 393
BLDG 15A
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

82 LYNN DR
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

P O BOX 2142
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 20-3276365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITELL, LISA Y
4400 E. HIGHWAY 20, SUITE 211
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

HENDERSON, REYNOLDS
184 EAST WATER ST
ROSEMARY BEACH, FL 32461 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: REYNOLDS HENDERSON

02/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CARLISLE-NORTHCUTT, TRICIA
Address: 16 HIGH DUNES DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VP
Name: RICE, SUSANNAH
Address: 5261 HIGHLAND RD #368
City-St-Zip: BATON ROUGE, LA 70808

Title: T
Name: BILLINGSLEY, ZACHARY
Address: 57 1ST STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: S
Name: HENDERSON, REYNOLDS
Address: 184 EAST WATER ST
City-St-Zip: ROSEMARY BEACH, FL 32461

I hereby 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 all other like empowered.

SIGNATURE: REYNOLDS HENDERSON

MR

02/16/2010

Electronic Signature of Signing Officer or Director

Date