

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90146 005 ****70.00

DOCUMENT # N05000011970

1. Entity Name

MISSING CHILDREN'S INSTITUTE INC.



Principal Place of Business

315 ALABAMA AVENUE
APOPKA FL 32703

Mailing Address

315 ALABAMA AVENUE
APOPKA FL 32703



2. Principal Place of Business

16 West Virgil St

3. Mailing Address

16 West Virgil St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Apopka Florida

City & State

Apopka Florida

Zip

32712

Country

USA

Zip

32712

Country

USA

4. FEI Number

54-2195406

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

CENTRONE, HEBERT G
315 ALABAMA AVENUE
APOPKA FL 32703

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed name and title of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-29-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME CENTRONE, HEBERT G
STREET ADDRESS 315 ALABAMA AVENUE
CITY-ST-ZIP APOPKA FL 32703

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Denise Walker
STREET ADDRESS 12540 Unbridged St.
CITY-ST-ZIP Apopka, FL 32703

TITLE ☐ Change ☒ Addition
NAME VP Mike Bischof
STREET ADDRESS 384 Lisa Karen Cir.
CITY-ST-ZIP Apopka, FL 32712

TITLE ☐ Change ☒ Addition
NAME ROBERT Findley
STREET ADDRESS 30510 CR 437
CITY-ST-ZIP Sevierville, FL 32776

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

3-29-06 407575 8221