2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N05000012282

Entity Name: WEST FLORIDA CHILDREN'S ASSOCATION, INC.

Current Principal Place of Business:

4400 E. HIGHWAY 20, SUITE 202
NICEVILLE, FL 32578

New Principal Place of Business:

4565 COMMERCIAL DRIVE, #103
NICEVILLE, FL 32578

Current Mailing Address:

4400 E. HIGHWAY 20, SUITE 202
NICEVILLE, FL 32578

New Mailing Address:

P.O. BOX 5148
NICEVILLE, FL 32578

FEI Number: 20-3917386 **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 202
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

PITELL, LISA Y
4565 COMMERCIAL DRIVE, #103
NICEVILLE, FL 32578 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: _____ 04/15/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FEDONCZAK, TERESA W
Address: PO BOX 8
City-St-Zip: VALPARAISO, FL 32580

Title: VP ( ) Delete
Name: HILL, KELLY
Address: 4400 E. HIGHWAY 20, SUITE 202
City-St-Zip: NICEVILLE, FL 32578

Title: S ( ) Delete
Name: PITELL, LISA Y
Address: 4400 E. HIGHWAY 20, SUITE 202
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: HILL, KELLY
Address: 4565 COMMERCIAL DRIVE, #103
City-St-Zip: NICEVILLE, FL 32578

Title: S (X) Change ( ) Addition
Name: PITELL, LISA Y
Address: 4565 COMMERCIAL DRIVE, #103
City-St-Zip: NICEVILLE, FL 32578

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: FEDONCZAK, TERESA W PRES 04/15/2009
Electronic Signature of Signing Officer or Director — Date