

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012675

FILED
Apr 30, 2007
Secretary of State

Entity Name: TABITHA INTERNATIONAL CHILDREN COMPASSION, INC.

Current Principal Place of Business:

1550 NORTH FEDERAL HWY UNIT 8
BOYNTON BEACH, FL 33435

New Principal Place of Business:

3555 HARLOWE AVENUE
BOYNTON BEACH, FL 33436

Current Mailing Address:

12157 COLONY PRESERVE DR
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 65-1234897 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DERILUS, OSIAS REV.
12157 COLONY PRESERVE DR
BOYNTON BEACH, FL 33436 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: PD () Delete
Name: DERILUS, OSIAS REV.
Address: 12157 COLONY PRESERVE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VPD () Delete
Name: DORSAINVIL, GESIUS REV.
Address: 101 SOUTHERN CROSS LN, BUILDING 5
City-St-Zip: BOYNTON BEACH, FL 33436

Title: SD () Delete
Name: DERILUS, MYRTHO MRS.
Address: 12157 COLONY PRESERVE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: TD () Delete
Name: COMPANS, CHAM S MRS.
Address: 1058 MANOR DRIVE
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: ALBERT, GUIMSON
Address: 711 NORTH 7TH STREET
City-St-Zip: LANTANA, FL 33462

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:

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: OSIAS DERILUS

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date