

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002440

FILED  
Jan 21, 2007  
Secretary of State

Entity Name: LIFE CHANGING CHILDREN, INC.

## Current Principal Place of Business:

2451 SE 156TH PLACE RO9AD  
SUMMERFIELD, FL 344915024

## New Principal Place of Business:

## Current Mailing Address:

2451 SE 156TH PLACE RO9AD  
SUMMERFIELD, FL 344915024

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROOT, DANIEL R  
2451 SE 156TH PLACE RO9AD  
SUMMERFIELD, FL 344915024 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: CEO ( ) Delete  
Name: ROOT, RUTH C  
Address: 2451 SE 156TH PLACE RO9AD  
City-St-Zip: SUMMERFIELD, FL 344915024

Title: P ( ) Delete  
Name: LARSSON, ERIC  
Address: 8741 SW 19TH AVE. RD  
City-St-Zip: OCALA, FL 34476

Title: V ( ) Delete  
Name: GOETZ, MICHAEL  
Address: P.O. BOX 1101  
City-St-Zip: SILVER SPRINGS, FL 34489

Title: T ( ) Delete  
Name: SMOLARSKI, ALAIN  
Address: 4828 SE 12TH PLACE  
City-St-Zip: OCALA, FL 34471

Title: S ( ) Delete  
Name: FINLAY, WENDY  
Address: 2822 SE 6TH STPLACE RO9AD  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: SMITH, RAYMOND L  
Address: 16117 SW 44TH CIRCLE  
City-St-Zip: OCALA, FL 34473

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

Title: T (X) Change ( ) Addition  
Name: LARSSON, ERIC  
Address: 8741 SW 19TH AVENUE RD.  
City-St-Zip: OCALA, FL 34476

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RAYMOND L. SMITH

P

01/21/2007

Electronic Signature of Signing Officer or Director

Date