2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010125

FILED May 07, 2009 Secretary of State

Entity Name: CARING & CONCERNED PARENTS OF AMERICA INC.

Current Principal Place of Business: New Principal Place of Business:

221 S.E. 3RD AVE . 1015 SEAGRAPE RD. LANTANA, FL 33462 1B

BOYNTON, FL 33435

New Mailing Address: Current Mailing Address:

221 S.E. 3RD AVE 1015 SEAGRAPE RD. LANTANA, FL 33462

BOYNTON BCH., FL 33435

FEI Number: 42-1713700 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, DAVID L SR SMITH, DAVID L SR 221 S.E. 3RD AVE. 1015 SEAGRAPE RD US LANTANA, FL 33462

BOYNTON, FL 33435 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: DAVID L. SMITH SR. 05/07/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SMITH, DAVID L SR SMITH, DAVID L SR Name: Name:

221 S.E. 3RD AVE APT 1B Address: 1015 SEAGRAPE RD. Address: City-St-Zip: BOYNTON BCH., FL 33435 City-St-Zip: LANTANA, FL 33462

Title: () Delete Title: (X) Change () Addition JOSEPH, COLLETTE M Name: JOSEPH, COLLETTE M Name:

Address: 2301 S.E. 4TH STREET APT 2# Address: 1015 SEAGRAPE RD. City-St-Zip: BOYNTON BCH, FL 33435 City-St-Zip: LANTANA, FL 33462

Title: () Delete Title: (X) Change () Addition

JOSEPH, DRUNEL JOSEPH, DRUNEL Name: Name: 2301 S.E. 4TH STREET APT 2# 1015 SEAGRAPE RD. Address: Address: City-St-Zip: BOYNTON BCH, FL 33435 City-St-Zip: LANTANA, FL 33462

Title: **PCEO** (X) Delete Title: () Change () Addition

SMITH, DAVID L SR Name: 221 S.E. 3RD AVE APT. 1B Address: Address: City-St-Zip: BOYNTON, FL 33435 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: DAVID L. SMITH SR. CEO 05/07/2009