

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011579

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: ACTIVE CITIZENS FOR CHILDREN, INC.

## Current Principal Place of Business:

1021 CARRIBEAN AVE  
CLEWISTON, FL 33440

## New Principal Place of Business:

416 E OSCEOLA AVE  
CLEWISTON, FL 33440

## Current Mailing Address:

1021 CARRIBEAN AVE  
CLEWISTON, FL 33440

## New Mailing Address:

416 E OSCEOLA AVE  
CLEWISTON, FL 33440

FEI Number: 20-5872557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUSSEY, ALISON C  
4365 SOUTH DEL PRADO BOULEVARD  
CAPE CORAL, FL 33910 US

## Name and Address of New Registered Agent:

VARY, MERCEDES P  
416 E OSCEOLA AVE  
CLEWISTON, FL 33440 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: MERCEDES P. VARY

04/16/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: SANCHEZ, CANDACE  
Address: 1021 CARRIBEAN AVE  
City-St-Zip: CLEWISTON, FL 33440

Title: VICE ( ) Delete  
Name: HOLCOMB, BRENDA  
Address: 1821 RED ROAD  
City-St-Zip: CLEWISTON, FL 33440

Title: TREA ( ) Delete  
Name: HUGHES, SHARON  
Address: 707 HOOVER DIKE ROAD UNIT # 1004  
City-St-Zip: CLEWISTON, FL 33440

Title: SEC ( ) Delete  
Name: VARY, MERCEDES P  
Address: 416 E OSCEOLA AVE  
City-St-Zip: CLEWISTON, FL 33440

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: HOLCOMB, BRENDA L  
Address: 1821 RED ROAD  
City-St-Zip: CLEWISTON, FL 33440

Title: VICE (X) Change ( ) Addition  
Name: REESE, ANNAMARIE  
Address: 807 CARIBBEAN AVE  
City-St-Zip: CLEWISTON, FL 33440

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: MERCEDES P. VARY

SEC

04/16/2009

Electronic Signature of Signing Officer or Director

Date