

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06588

FILED
Jan 13, 2009
Secretary of State

Entity Name: 4 CHILDREN'S S.A.K.E., INC.

Current Principal Place of Business:

4850 NE 13TH AVENUE
OAKLAND PARK, FL 33334

New Principal Place of Business:

1000 CORPORATE DRIVE
SUITE 340
FORT LAUDERDALE, FL 33334

Current Mailing Address:

4850 NE 13TH AVENUE
OAKLAND PARK, FL 33334

New Mailing Address:

1000 CORPORATE DRIVE
SUITE 340
FORT LAUDERDALE, FL 33334

FEI Number: 59-2689107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOEMAKER, WILLIAM E
4850 NE 13TH AVENUE
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

SHOEMAKER, WILLIAM E
1000 CORPORATE DRIVE
SUITE 340
FORT LAUDERDALE, FL 33334 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: WILLIAM E. SHOEMAKER

01/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GARRET, JOAN
Address: 4629 POINCIANA STREET #302
City-St-Zip: LBTs, FL 33308

Title: TD () Delete
Name: RIHL, JANET
Address: 3389 COCOPLUM CIR
City-St-Zip: COCONUT CREEK, FL 33063

Title: PD () Delete
Name: SHOEMAKER, WILLIAM
Address: 4850 NE 13TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

Title: VP () Delete
Name: HALEY, BARBARA L
Address: 8002 SW 5TH STREET
City-St-Zip: NORTH LAUDERDALE, FL 33068

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:

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: WILLIAM E. SHOEMAKER

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01/13/2009

Electronic Signature of Signing Officer or Director

Date