

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004015

FILED
Apr 11, 2008
Secretary of State

Entity Name: NANA'S CHILDREN'S HOME, INC.

Current Principal Place of Business:

3460 COREY ROAD
MALABAR, FL 32950

New Principal Place of Business:

Current Mailing Address:

3460 COREY ROAD
MALABAR, FL 32950

New Mailing Address:

FEI Number: 65-1304173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRODGE, KIMBERLY M
3460 COREY ROAD
MALABAR, FL 32950 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: D () Delete
Name: FRODGE, KIMBERLY M
Address: 3460 COREY ROAD
City-St-Zip: MALABAR, FL 32950

Title: D () Delete
Name: FRODGE, ERIC J
Address: 3460 COREY ROAD
City-St-Zip: MALABAR, FL 32950

Title: D () Delete
Name: REED, LISA M
Address: 1756 LA MADERIA DRIVE, SW
City-St-Zip: PALM BAY, FL 32908

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: DILLON, TRACI
Address: 525 CHIPPEWA AVE. NE
City-St-Zip: PALM BAY, FL 32907

Title: D () Change (X) Addition
Name: DILLON, JOE
Address: 525 CHIPPEWA AVE. NE
City-St-Zip: PALM BAY, FL 32907

Title: D () Change (X) Addition
Name: CHANEY, GLEN E
Address: 202 N. HARBOR CITY BLVD. STE. 300
City-St-Zip: MELBOURNE, FL 32935

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: KIMBERLY M. FRODGE

D

04/11/2008

Electronic Signature of Signing Officer or Director

Date