

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006043

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: THE R. W. CHILD WELFARE CORPORATION

## Current Principal Place of Business:

9910 SW 12TH STREET  
PEMBROKE PINES, FL 33025

## New Principal Place of Business:

8362 PINES BLVD  
284  
PEMBROKE PINES, FL 33025

## Current Mailing Address:

2313 SW 61ST AVE.  
MIRAMAR, FL 33023

## New Mailing Address:

8362 PINES BLVD  
284  
PEMBROKE PINES, FL 33025

FEI Number: 26-0357710

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, ROBERT D  
770 NW 168 DR.  
MIAMI, FL 33169 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: P ( ) Delete  
Name: WILLIAMS, ROBERT D SR  
Address: 770 NW 168 DR  
City-St-Zip: MIAMI, FL 33169

Title: VP ( ) Delete  
Name: PHILLIPS, LEIGHTON  
Address: 4785 NW 85TH AVE  
City-St-Zip: LAUDERHILL, FL 33351

Title: T ( ) Delete  
Name: WILLIAMS, ROBERT D SR  
Address: 770 NW 168 DR  
City-St-Zip: MIAMI, FL 33169

Title: SEC ( ) Delete  
Name: SALMON, AUDREY P  
Address: 100 SW 65 WAY  
City-St-Zip: PEMBROKE PINES, FL 33023

## 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: ROBERT WILLIAMS

PRES

04/25/2008

Electronic Signature of Signing Officer or Director

Date