

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008630

FILED
Jan 05, 2009
Secretary of State

Entity Name: THE WHOLE CHILD CONNECTION, INC.

Current Principal Place of Business:

2030 SE OCEAN BLVD
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

2030 SE OCEAN BLVD.
STUART, FL 34996

New Mailing Address:

PO BOX 2187
STUART, FL 34995

FEI Number: 51-0647845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, NICOLE
2030 SE OCEAN BLVD.
STUART, FL 34996 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: C () Delete
Name: CARICCHIOLI, KATHY
Address: 815 COLORADO AVE
City-St-Zip: STUART, FL 34994

Title: VC () Delete
Name: WASHINGTON, THELMA
Address: 601 SE LAKE ST.
City-St-Zip: STUART, FL 34994

Title: T () Delete
Name: BLOCK, ANITA
Address: 33 SW FLAGLER AVE.
City-St-Zip: STUART, FL 34994

Title: S () Delete
Name: DAWN, MITCHELL
Address: 43 SW MONTEREY RD
City-St-Zip: STUART, FL 34994

Title: M () Delete
Name: FRIEDMAN, GLORIA
Address: 2401 SE MONTEREY RD
City-St-Zip: STUART, FL 34996

Title: M () Delete
Name: LURRY, MARYELLEN Q
Address: 500 EAST OCEAN BLVD.
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VC (X) Change () Addition
Name: DELANCY, ROBERT
Address: 508 MLK, JR. BOULEVARD
City-St-Zip: STUART, FL 34994

Title: T (X) Change () Addition
Name: BROCK, ANITA
Address: 33 SW FLAGLER AVE.
City-St-Zip: STUART, FL 34994

Title: M (X) Change () Addition
Name: HASTINGS, WILLIAM
Address: 615 SW ST. LUCIE CRESCENT
City-St-Zip: STUART, FL 34994

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: M (X) Change () Addition
Name: LUNNY, MARYELLEN Q
Address: 500 EAST OCEAN BLVD.
City-St-Zip: STUART, FL 34994

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: NICOLE KING

E D

01/05/2009

Electronic Signature of Signing Officer or Director

Date