

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009077

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: ABC CHILDREN'S AID USA, INC.

## Current Principal Place of Business:

7148 CURRY FORD ROAD  
SUITE 100  
ORLANDO, FL 32822

## New Principal Place of Business:

830 NORTH JOHN YOUNG PARKWAY  
KISSIMMEE, FL 34741

## Current Mailing Address:

7148 CURRY FORD ROAD  
SUITE 100  
ORLANDO, FL 32822

## New Mailing Address:

830 NORTH JOHN YOUNG PARKWAY  
KISSIMMEE, FL 34741

FEI Number: 26-1139134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ORIEL-COMENENCIA, NEMA C  
7148 CURRY FORD ROAD  
SUITE 100  
ORLANDO, FL 32822 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: ORIEL-COMENENCIA, NEMA C  
Address: 7148 CURRY FORD ROAD SUITE 100  
City-St-Zip: ORLANDO, FL 32822

Title: VP ( ) Delete  
Name: SILVER, BETH  
Address: 8916 ANGELICA DRIVE  
City-St-Zip: ORLANDO, FL 32836

Title: SEC ( ) Delete  
Name: MAYNITE, LESLIE  
Address: 2841 WINDSOR HILL DRIVE  
City-St-Zip: WINDERMERE, FL 34786

Title: COO ( ) Delete  
Name: FORNIER, REEZA  
Address: 4550 OAKCREEK ST #202  
City-St-Zip: ORLANDO, FL 32835

Title: TREA ( ) Delete  
Name: JONES, MARYANN  
Address: 2267 LAUREL BLOSSOM CIRCLE  
City-St-Zip: OCOEE, FL 34761

Title: T (X) Delete  
Name: TORRES, RESTY  
Address: 9780 WILD OAK DR  
City-St-Zip: WINDERMERE, FL 34786

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change ( ) Addition  
Name: ORIEL-COMENENCIA, NEMA C  
Address: 7148 CURRY FORD ROAD SUITE 100  
City-St-Zip: ORLANDO, FL 32822

Title: P (X) Change ( ) Addition  
Name: SILVER, BETH  
Address: 8916 ANGELICA DRIVE  
City-St-Zip: ORLANDO, FL 32836

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

Title: VP (X) Change ( ) Addition  
Name: RODRIGUEZ, HERBERT  
Address: 14104 SNEAD CIRCLE  
City-St-Zip: ORLANDO, FL 34761

Title: MEM (X) Change ( ) Addition  
Name: JONES, MARYANN  
Address: 2267 LAUREL BLOSSOM CIRCLE  
City-St-Zip: OCOEE, FL 34761

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: NEMA ORIEL-COMENENCIA

TREA

03/23/2009

Electronic Signature of Signing Officer or Director

Date