2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009724

FILED Mar 21, 2009 Secretary of State

Entity Name: HONDURAS CHILDREN AND FRIENDS FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 66 VALENCIA AVENUE 801 CORAL GABLES, FL 33134 **New Mailing Address: Current Mailing Address:** 66 VALENCIA AVENUE CORAL GABLES, FL 33134 FEI Number: 26-0536894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOORE, NANCY Y MOORE, NANCY Y 400 NW 32 AVENUE 400 NW 32 AVENUE MIAMI, FL 33125 MIAMI, FL 33125 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: NANCY Y. MOORE 03/21/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP (X) Change () Addition () Delete CHIANESSE, NILIA CHIANESSE, NILIA Name: Name: 66 VALENCIA AVENUE #801 Address: 66 VALENCIA AVENUE #801 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: DV Title: (X) Change () Addition () Delete DURAND, LINA I Name: RAMOS, MARIA A Name: Address: 1209 WALLACE STREET Address: 11852 SW 103 LN City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33186 Title: DS () Delete Title: S, D (X) Change () Addition MOORE, NANCY Y MOORE, NANCY Y Name: Name: 400 NW 32 AVENUE Address: Address: 400 NW 32 AVENUE City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33125 Title: DT () Delete Title: (X) Change () Addition Name: MAIRENA, SANDRA A Name: SARAVIA, WENDY J 207 GRAND CANAL DRIVE Address: 6420 SW 82TH STREET Address: City-St-Zip: SOUTH MIAMI, FL 33143 City-St-Zip: MIAMI, FL 33144 Title: () Delete Title: () Change (X) Addition DURAN, LINA I Name: Name: 1209 WALLACE STREET Address: Address: City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: () Change (X) Addition MILNE, MELBA Name: Name: Address: Address: 16247 MARIPOSA CIRCLE S PEMBROKE PINES, FL 33331 City-St-Zip: 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: NANCY Y. MOORE S, D 03/21/2009