

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011593

FILED
Feb 03, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA CHILDREN'S MINISTRIES, INC.

Current Principal Place of Business:

6220 ALL AMERICAN BLVD.
SUITE 29
ORLANDO, FL 32810 US

New Principal Place of Business:

6220 ALL AMERICAN BLVD.
SUITE 20
ORLANDO, FL 32810 US

Current Mailing Address:

6220 ALL AMERICAN BLVD.
SUITE 29
ORLANDO, FL 32810 US

New Mailing Address:

6220 ALL AMERICAN BLVD.
SUITE 20
ORLANDO, FL 32810 US

FEI Number: 51-0662283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARDWELL, MICHAEL B
8801 MAGNOLIA HOMES ROAD
ORLANDO, FL 32810 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: HORTON, JAMES R
Address: 3916 FINCH STRET
City-St-Zip: ORLANDO, FL 32803 US

Title: VP () Delete
Name: BARDWELL, MICHAEL B
Address: 8801 MAGNOLIA HOMES ROAD
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES R HORTON

P

02/03/2009

Electronic Signature of Signing Officer or Director

Date