2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2009
Secretary of State

DOCUMENT# N08000004649

Entity Name: CHILDREN'S SPIRIT OF HOPE FOUNDATION, INC.

Current Principal Place of Business:

2724 NE 26TH AVE.
FT. LAUDERDALE, FL 33306

New Principal Place of Business:

Current Mailing Address:

2724 NE 26TH AVE.
FT. LAUDERDALE, FL 33306

New Mailing Address:

FEI Number: 61-1564366 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: D ( ) Delete
Name: DAVIS, SUZANNE
Address: 2724 NE 26TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: D ( ) Delete
Name: WOJEIK, MONICA
Address: 11648 NW 5TH ST.
City-St-Zip: PLANTATION, FL 33325

Title: D ( ) Delete
Name: PENSON, MATT
Address: 8005 NW 110TH DR.
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: WOJCIK, MONICA
Address: 11648 NW 5TH ST.
City-St-Zip: PLANTATION, FL 33325

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: MONICA WOJCIK D 08/07/2009

Electronic Signature of Signing Officer or Director — Date